



184 Main Street  
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# Counselor Application

Position: \_\_\_\_\_ Date: \_\_\_\_\_

Referred By: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone (home): \_\_\_\_\_ (cell): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current Grade/Year in School: \_\_\_\_\_ Social Security # : \_\_\_\_\_

## Education

Name of School	Degree	Year of Graduation
High School		
College		

List any honors or accomplishments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Interests/Skills: (hobbies, sports, clubs) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Experience with Children: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Red Cross Certifications: \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ Date: \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony? \_\_\_\_\_ If yes please describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Previous Employment:

Place of Work	Position	Dates	Supervisor Number

References: (please give three references of people not related to you)

Name	Phone	Position	Years Known

I acknowledge that all information stated above is true and authorize Red Robin to contact any previous employer or personal reference.

X \_\_\_\_\_  
 Applicant's Signature

Date: \_\_\_\_\_

For Official Use Only:	
	References Checked?    Yes    No
Bus Counselor:	Placement:
Before Care:	Interviewers Initials:
After Care:	
Comments: _____	
_____	
_____	
_____	