

HELPER APPLICATION

Helper's Name: _____

Other Names Used: _____
(include maiden, nicknames, previous married names, etc.)

Address: _____

Street
City
State
Zip Code

Telephone Number: _____

Are you at least 14 years of age? Yes No

Are you at least 18 years of age? Yes No

Have you ever cared for children? If yes, explain _____

Have you ever been investigated in connection with a charge of child abuse or neglect?
 Yes No If yes, explain _____

Have you ever been convicted of a crime involving either violence to persons or breach of moral conduct (i.e. rape, sexual molestation, incest, narcotics, etc.)? Yes No If yes, explain _____

Have you ever been convicted of any felony? Yes No If yes, explain (including the date of the conviction) _____

List 3 non-related references who know your ability to care for children

	Name	Address	City	State	Zip Code	Phone
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____

 Applicant's Signature

 Date

