



2024 Job Training Program Application

Full Name: _____ Date: _____

Contact Information

Phone Number used most: (____) - _____

Email Address: _____

Maggie's Place House:

Move in Date to Maggie's Place: _____ Contact Person: _____

Alternate Address (If any):

Available Start Date: _____ Days/ Hours Preferred _____

Are you currently employed, going to school, or have prior commitments? _____

What hours are you NOT available? _____

Are you willing to take public transport to get to the Program if necessary? _____

Are you currently pregnant? Yes No

Education:

Please Circle One:

Some High School High School College Specialized Training Trade School Other

Name of School currently attending (if any): _____

List any special skills, trades, hobbies, and interests:

Describe why you are interested in the Job Training Program:

What do you hope to learn from this experience? Have you set any life goals that the Job Training Program may help you achieve?

Previous Work Experience

Please list current or most recent employment first

Company Name _____

Dates Employed (MM/YY) _____

Role/Title _____

Tasks performed:

Reason for leaving:

Company Name _____

Dates Employed (MM/YY) _____

Role/Title _____

Tasks performed:

Reason for leaving:

Company Name _____

Dates Employed (MM/YY) _____

Role/Title _____

Tasks performed:

Reason for leaving:

Company Name _____

Dates Employed (MM/YY) _____

Role/Title _____

Tasks performed:

Reason for leaving:

Signature of Applicant/ Mom

Signature of Employment Specialist/ MP Staff

Staff Use Only:

Date Received:

Read By: