

Counselor Application
(Use additional sheets as necessary)

Name: _____

Address: _____ City _____ Zip code _____

Home phone: _____ Cell Phone: _____ Work: _____

Email address: _____

Date of birth: _____ Church Affiliation _____

Sex M F (we try to have 1 male/1 female counselor) Martial Status M S
If married, Number of children _____

Texas Driver's License # _____

Have you ever been a part of the Ulster Project? _____
When? _____ Where? _____
How were you part of the Ulster Project? _____

Tell us about your education _____

Tell us about your employment: _____

If you are employed, are you certain you will be available the entire month of July to participate in all activities? Yes No Possibly

What are your interests and activities outside of work/school?

Why do you want to be an Ulster Project counselor and what do you feel are your qualifications?

Please provide references on reverse or separate sheet. You will be required to submit to a background check and interview.

**Return to:
Ulster Project Arlington
PO Box 150701
Arlington, TX 76015**