



**Hispanic Family Center of Southern New Jersey  
35-47 S. 29<sup>th</sup> Street, Camden, New Jersey 08105**

**Green Jobs Training Partnership Program Application**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
Last First Middle

Gender: \_\_\_\_\_ SS#: \_\_\_\_\_ Marital Status: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Cell # \_\_\_\_\_ Email: \_\_\_\_\_

Have you resided at the address above for the last 7 years? \_\_\_\_\_. If not, please list which state(s):  
\_\_\_\_\_

Are you a US Citizen?  Yes  No If no, are you a Permanent Resident?  Yes  No

Number of persons currently living in your household. \_\_\_\_ Combined Income \$ \_\_\_\_\_  weekly  monthly

Are you committed to an 8 week, 35 hours per week training program?  Yes  No

Are you able to lift 20 pounds?  Yes  No Are you able to walk up and down stairs? Yes  No

What are your main goals?  Obtain a better job  Obtain a higher paying job  Learn a new skill  
 Other \_\_\_\_\_

What type of transportation do you currently have access to?  Car  Public Transportation  Other

Do you currently have a valid driver's license?  Yes  No

Has your license been revoked or suspended during the past 5 years?  Yes  No If yes, please explain  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

Do you have any court cases pending that may or may not result in a conviction?  Yes  No

**If yes, please record all misdemeanors and felonies (other than parking tickets and minor driving violations) for which you have been or may be convicted. Provide year of offense, city and state where offense was committed, and an explanation of the offense.** (Criminal convictions do not automatically bar you from consideration for the program. Factors such as age at time of conviction, length of time since offense, seriousness of offense, and rehabilitation will be considered. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently on parole or probation?  Yes  No If yes, please specify \_\_\_\_\_  
\_\_\_\_\_

## EDUCATION

**Please list the schools that you attended.**

Type of School	Name of School	Address	Did you graduate?	Degree or Subject Studied
High School				
Technical/ Vocational				
College/University				

If you obtained your GED, when was your date of completion? \_\_\_\_\_.

Please list any certifications you have received as a result of a training or certification program.

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Please describe other skills (e.g. computer skills, office skills, machine operator, etc.)

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## EMPLOYMENT

Are you currently employed?  Yes  No    If yes, are you working  Full-time  Part-time

If no, are you receiving  Unemployment benefits  Welfare  Disability  Pension  Veterans  Other

**Please list your last three (3) employers, starting with the most current.**

Company Name	Address	Dates (mo.& year)	Duties	Reason for Leaving
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Which Green Jobs position would you be interested in securing upon completion of the training program:

Energy Efficiency Assistant     Air Seal/Insulator     Home Rater     Energy Auditor

Signature \_\_\_\_\_ Date \_\_\_\_\_