

**Orange County**  
**Adult Alcohol and Drug Sober Living Facilities Certification**  
**Facility Staff Application Information**

Facility Name: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Facility Executive Director / Owner: \_\_\_\_\_

Staff Member's Full Name: \_\_\_\_\_

List any other names ever used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Current Home Address and Phone Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State Issuing License: \_\_\_\_\_

Education and academic achievements\*: \_\_\_\_\_

Prior work experience\*: \_\_\_\_\_

If any, list all criminal convictions\*: \_\_\_\_\_

Are you required to register: As a Narcotic Offender? Yes \_\_\_ No \_\_\_

As a Sex Offender? Yes \_\_\_ No \_\_\_

As an Arson Offender? Yes \_\_\_ No \_\_\_

If you are required to register, are you currently registered as required by law? Yes \_\_\_ No \_\_\_

Are you currently on Probation or Parole? Yes \_\_\_ No \_\_\_

If yes, Probation/Parole Officer's Name and Phone Number: \_\_\_\_\_

If any, list current criminal street and/or prison gang participation: \_\_\_\_\_

I swear under penalty of perjury that the forgoing is true and correct:

Staff applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* Use a separate sheet to list additional education, work experience, or convictions, if needed.