



5. List all significant activities/dates since your criminal conviction or confirmation of abuse, such as employment, participation in therapy or education:

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6. References. List your references below and provide telephone numbers where they may be contacted. In providing this information, you are consenting to the Department of Human Services or their designee, contacting these individuals for reference verification purposes. Written statements of support may also be submitted:

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7. Other comments you may wish to make regarding your exemption request:

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**8. SEND COMPLETED REQUEST FOR EXEMPTION FORM TO:**

Fieldprint, Inc.  
12000 Commerce Parkway  
Suite 100  
Mount Laurel, NJ 08054