2019
Garden/Dairy Apprenticeships Application Form

P.O. Box 1045, Kimberton, PA, 19442  Phone: 610-935-3963; Fax: 610-935-8896
Email: information@camphillkimberton.org

Date:

First Name                                        Middle                                        Last
Address                                           
Phone                                             Email                                       Skype
Date of birth                                Gender

Your age                                        Marital Status                       Accompanying Children?

Proposed dates of stay: from                    to
Are you a licensed driver? Yes      No      If yes, for how long?
Can you drive manual vehicles? Yes      No

INTERNATIONAL APPLICANTS

Nationality                                        Place of Birth

If English is not your first language how fluent are you?

EDUCATION

School Name,     Location,     Period of Enrollment,     Graduated?

High School
College (University)
Other
Are you currently enrolled in a post-secondary program?  YES  NO
Major field of study:
If you completed a post secondary program, date completed and degree /diploma earned:

EMPLOYMENT HISTORY

(For this and the following questions, please feel free to use additional space if needed.)

Please list positions held beginning with the most current.

<table>
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<tr>
<th>Employer</th>
<th>Your Position</th>
<th>Dates of Employment</th>
<th>Reason for Leaving</th>
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GENERAL INFORMATION

How did you hear about Kimberton Hills?

What motivates you to do an apprenticeship in biodynamic agriculture at this time in your life?

What experience have you had that relates to this position?

What do you think would be particularly challenging for you?

What do you want to learn during your apprenticeship?
How do you feel about working in hot, wet, cold conditions doing manual labor for long hours?

Sankanac CSA and the Kimberton Hills Dairy are parts of Camphill Village Kimberton Hills, an intentional community that includes adults with developmental disabilities. What experience have you had with people who have developmental disabilities?

Do you currently have financial obligations? If so, how can you manage them while volunteering in our community?

Do you have any issues or reservations regarding living with pets or helping with farm animals?

REFERENCES

Please list three references. At least two should be a work or school related reference. Please, no relatives or people known to you primarily as friends.

Name telephone# email address relationship to you

1.
2.
3.
HEALTH AND MEDICAL INFORMATION

Our work at Kimberton Hills is both rewarding and challenging—physically, mentally and emotionally. In order to have an enjoyable and successful experience as a coworker it is therefore essential to be in good physical and emotional health. To verify the state of your health, past and present, we ask that you answer the questions below. A doctor will need to fill out the Physician’s Report form (to be sent separately), and we will need a note from a dentist verifying that your dental work is up to date, but these forms can be provided to us later in the application process.

Please describe your physical, emotional, and mental health both past and present. Are there any medications being prescribed for you currently that you would continue with during your service year? Have you been hospitalized? (Kimberton Hills cannot cover health care costs for conditions which are not disclosed during the application process.)

Do you have a special diet? If so, please describe briefly:

Please describe your current and past relationship to alcohol and illegal substances (drugs) including marijuana.
**AUTOBIOGRAPHY**

Please write a brief autobiography, written in a narrative rather than a vitae format indicating significant experiences that have shaped who you are. Use this space to tell us important information that has not been sufficiently addressed in the application.

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*I certify that all statements made in this application are accurate.*

*I authorize Camphill Village Kimberton Hills to verify my references. I understand that as part of the application process, a medical form to verify the state of my health, current treatments, and past medical history must be completed by my physician and sent to Kimberton Hills. Additionally my dentist must provide a certificate indicating my current dental condition. I further understand that I am responsible for any dental work that may be required in the future.*

*For United States citizens: I agree to allow Camphill Village Kimberton Hills to do a criminal background check. If you reside outside of the United States: I will provide a criminal background check from my country of residence.*

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*Signature of Applicant  Date*