

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.

Employer	Your Position	Dates of Employment	Reason for Leaving
1.			
2.			
3.			

GENERAL INFORMATION

We are interested to learn how you have been active in volunteer service, social action groups, and support for individuals with a disability or other needs. Please tell us why you decided to get involved in volunteer service and what you received in return - what did you learn? Your involvement could include supporting an individual, contributing in your neighborhood, school, youth group, social, professional, land care, volunteer groups.

What motivates you to volunteer in our community at this time in your life?

What particular strengths or skills would you bring to community life, working with people with special needs, housework, land work, or crafts?

What would be particularly challenging for you in joining our community?

What do you now see as your future vocation or future goals? Please describe two or three specific goals that you would like to work toward during your experience at Camphill?

How do you see your Camphill experience contributing to these goals?

How did you hear of Kimberton Hills?

Have you helped in a Camphill community previously? If so, where and when?

Have you visited or applied to any other Camphill community? If so, which one(s)?

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?

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

HEALTH INFO

Camphill life is enriching and presents many challenges - physical, mental, and emotional, and encompasses many outdoor activities. It is important that your physical, mental and emotional health allows you to participate fully in daily life here.

Please describe your ability to participate in potentially demanding conditions.

Are there areas where you might need special support or are not willing or able to help out? Do you have any physical and or mental health issues that would affect your ability to participate under such conditions (past or present)?

Please describe any medical conditions. Do you take any medications? If so, what is it for? Please let us know of any conditions or allergies that may affect your ability to perform these duties.

LEGAL ISSUES

Have you ever been convicted of a misdemeanor or a felony in any jurisdiction? Please indicate any prior convictions related to moving violations within the last three years. Please indicate any suspensions, revocations, DUI convictions, or any occurrence involving harm to any person or property.

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.				

AUTOBIOGRAPHY

Please write a brief autobiography indicating significant experiences that have influenced who you are today. Use this space to tell us important information that has not been sufficiently addressed in the other parts of this application. Please discuss ways in which your experience and background have influenced your decision to volunteer in Camphill. We are interested to read a chronological account of your life, including references to family background/situation, significant or life changing moments (for instance, encounters with significant people, community living experiences, etc), as well as any other details you consider relevant.

We would appreciate your account of an experience and event in your life which had a successful outcome, and what you learned from this.

Similarly, we would like you to tell us of an event in your life whose outcome you did not experience as successful, and what you learned from this.

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.

Signature of Applicant

Date