



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

Internship APPLICATION 2019

Date of Application:

Name:

Address:

Phone:

Email:

Skype Address:

Date of birth:

Female__ Male__

Proposed dates of stay from: _____ to _____

Your age _____ Marital status _____ Accompanying Children? _____

EDUCATION

Name

Location

Graduated?

Date

High School

College (University)

Other:

Describe any employment or volunteer experience you have had, with dates.

Please list 2 references who know you in a work or school situation: (please no family members or those you know primarily as "friends")

Name

email address

telephone number

1)

2)

GENERAL INFORMATION

What motivates you do an internship in our community?

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

What do you feel would be particularly challenging for you?

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.

Do you take any medication? Yes/no? If yes, what do you take, for what condition?

Do you have any special needs or medical issues that we should be aware of (for example: allergies, or personal needs)?

Please write a brief "autobiography" of yourself (just three or four paragraphs) describing a little about yourself so that we can get a better feel for "who you are".

Person to contact in case of emergency during your stay:

Name

address

telephone number

Relationship to you

I certify that all statements made in this application are accurate. I am in good in good physical and emotional health. I understand that I am responsible for any medical or dental expenses that may be required during my stay in Kimberton Hills. I understand that I will not be receiving payment for my services, but that I will be given free room and board while volunteering at Kimberton Hills.

 Date

 Signature of Applicant
Note:

Camphill Village Kimberton Hills requires a \$75 administrative fee for each intern who we accept into our program. We ask that this fee be paid on the first day of one's internship here. Thank you.



**Parental Release Form for Interns and Practicants (under the age of 21) to
Camphill Village Kimberton Hills**

This release signed on _____
Month day year

by _____ for _____
applicant's parent or legal guardian applicant

The applicant acknowledges and agrees that he or she is fully aware of the potential to suffer illness or injury while serving as an intern or practicum and is in a position to appreciate such risks and to protect him or herself from such illness or injury, including those arising from social interactions of the applicant that are not supervised by CVKH.

It is understood by the applicant that Camphill Village Kimberton Hills, Inc. cannot permit participation in the project without such applicant and applicant's parent or legal guardian signing a Release to protect Camphill Village Kimberton Hills, Inc. from claims arising from injury and/or CVKH's inability to completely supervise all of applicant's social interactions.

Therefore, intending to be legally bound, the applicant, or any person or entity on the applicant's behalf (including applicant's heirs, successors or assignees), hereby indemnify and hold CVKH, Inc. harmless, including for any expense of defense (including court costs and attorney fees) arising from any injury or damage (including death) suffered by the applicant or any other person present on the site as a result of the applicant's project on the premises of Camphill Village Kimberton Hills, Inc., while engaged in the project on the premises. The Law of the Commonwealth of Pennsylvania will apply to any dispute.

Applicant's Parent's Signature