GOOD Farm Apprenticeship APPRENTICESHIP APPLICATION 2018

Name:	age:	M/F
Address:	local phor	ne:
	email:	
Permanent address:	perm. pho	one:
	best time	to be reached by phone
How did you hear about us?		
What is the time period during which you will be a	vailable to appr	rentice?
What are your goals in becoming a farm apprentic	e?	
Describe the type of farm experience and skills in vector mention at least three specific areas of interest.	which you are m	ost interested. Please
Do you have any relevant medical conditions or ph	ysical limitation	ns that will affect your
ability to do farm work, or any emotional or psych If yes, please explain: Other considerations:	ological issues?	

Special Interests:
Please share three interesting things about yourself.
1.
2.
3.
Please share three things you think people should know about living with you.
1.
2.
3.
Attach a resume or provide a list of work experience, both paid and volunteer. Please also
make specific mention below of any experience working on a farm. Include details for skills gained.
Please list schools you have attended, degrees and/or major areas of study or training.
Are you able to visit farms to interview with farmers? YES or NO

Do you smoke? YES or NO			
Do you have any dietary restrictions? YES or NO			
Please describe:			
Will you eat meat raised at your host's farm? YES or NO			
Do you have transportation? YES or NO Can you drive a manual transmission? YES or NO			
REFERENCES 1			
Work reference	email	phone	
Work reference	email	phone	
3			

Return your completed application and any attachments via email to the goodfarmmv@gmail.com

email

Personal reference

Thank you!!!!

phone