

SHELBURNE FARMS

Application for Employment

PLEASE PRINT, except for signature line. No action can be taken unless all questions are answered fully and accurately. All information on this application will be held in strict confidence.

Name						
	(Last)		(First)		(Middle Initial)	
Address						
	(No.)	(Street)	(City)	(State)	(Zip)	
				ımber		
Shelburne I	Farms is require		r employment eligibility. P yment may commence.	Proof of eligibility wa	ill be required before	
			ion is less likely to be const		ite for current job	
Do you war	nt a position tl	nat is: Full time _	Part time	Tempo	orary	
If tempora	ry/part-time, j	please specify time a	available:			
Are you ava	ailable to work	:: Days Eve	nings Or both	? Weeken	ds?	
Are there c	currently any l	imitations on your a	availability to work dur	ing the hours of	6:00 am to	
midnight?	Yes N	o If yes, ple	ase explain:			
		r Shelburne Farms	in the past? Yes	_ No If y	es, in what	

AN EQUAL OPPORTUNITY EMPLOYER

Shelburne Farms provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientations, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state, and local laws.

1611 Harbor Road • Shelburne, VT • 05482 • (802) 985-8686 • Fax: (802) 985-8123

EDUCATION

Circle highest grade completed: Hi	igh School 9 10 11 12; C	College 1 2 3 4
High School Name:		
GED, if applicable: Yes No		
College or Vocational School: List co	ourse of study, number of year	rs attended and graduation status:
Other courses or training:		
Please complete this section even if stating with current or last employer any periods of unemployment. If sel	c. Account for all periods of tim	ne including military service and
Company	Address	
Telephone No		
Position Held	-	
Reason for leaving		
May we contact this employer: Yes _		
Company	Address	
Telephone No	_Supervisor's Name/Title	
Position Held	Employed f	rom to

Telephone No	_ Supervisor's Nar	me/Title	
Position Held		Employed from	to
Reason for leaving			
May we contact this employer: Yes _	No	If not, why not?	
Company	Address		
Celephone No Supervisor's Name/Title			
Position Held		Employed from	to
Reason for leaving			
May we contact this employer: Yes _	No	If not, why not?	
Company	Address		
Celephone No. Supervisor's Name/Title			
Position Held		Employed from	to
Reason for leaving			
May we contact this employer: Yes _	No	If not, why not?	

REFERENCES

References may be personal or professional. Please do not list relatives.

Name	Name		
Address	_ Address		
Telephone No	Telephone No		
Years Acquainted	_ Years Acquainted		
Please check: Professional Personal	Please check: Professional Personal		
How do you know this individual?	_ How do you know this individual?		
NameAddress			
Telephone No	*		
Years Acquainted Parsonal	 Years Acquainted Please check: Professional Personal 		
How do you know this individual?	_ How do you know this individual?		

ADDITIONAL SKILLS

Please list any special skills, qualifications or experience.

------ PLEASE READ OTHER SIDE CAREFULLY ------

APPLICANT'S CERTIFICATION, AUTHORIZATION and RELEASE

I understand that my receipt and submission of this application does not imply that I will be employed by Shelburne Farms. All employment at Shelburne Farms is at-will.

I authorize all persons, schools, employers and organizations mentioned in this application to provide Shelburne Farms and/or its representatives with any and all information requested by Shelburne Farms. The Shelburne Farms representative may ask any questions which she or he considers important to the hiring decision, including questions about my personal background, education, work experience, character and personality. I voluntarily release such persons, schools, employers and organizations from all liability for providing such information.

I affirm that I have supplied complete and correct information to the questions on this application and that I have withheld nothing that would, if discloseD, affect this application adversely. I understand that any omissions or falsifications may adversely affect my eligibility for employment with Shelburne Farms or will be cause for dismissal if employment has commenced.

Signature Date

Thanks very much for applying for a position at Shelburne Farms – we greatly appreciate your interest. Please know that we receive hundreds of applications each season. If appropriate, we will be contacting you for an interview, but please understand that it is not always possible to do additional follow-up. If you do not hear from us, you may want to check our website from time to time for additional job postings: www.shelburnefarms.org



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Shelburne Farms is a 1,400-acre working farm, national historic site and environmental education center. The mission of Shelburne Farms is to cultivate a conservation ethic in students, teachers, and the general public by teaching and demonstrating the stewardship of natural and agricultural resources.