



# herbaculture internship program

## 2018 APPLICATION FORM

### Application Checklist:

**COMPLETED APPLICATION FORM**

Please take time to read all questions carefully before you begin to complete this form. How fully and directly you respond to each, is an important indicator of your fit to this focused and intensive program. You may type or handwrite your answers. If you are handwriting, please print clearly.

**2 LETTERS OF RECOMMENDATION (Can be mailed/emailed separately)**

These can be from people you have worked for or with and should address your

- interest in Herbalism,
- experience living and/or working as a member of a team, and
- your physical ability to do production farm and landscape work in changeable climate.

Letters can be mailed with your application, sent directly, or emailed to [herbaculture@herb-pharm.com](mailto:herbaculture@herb-pharm.com).

**WORK, EDUCATION AND ACTIVITY HISTORY**

Please provide information about the employers, teachers or programs that you have been working with over the past five years. Please attach a copy of your resume or work history to this application

Resumes can be mailed with your application, sent directly, or emailed to [herbaculture@herb-pharm.com](mailto:herbaculture@herb-pharm.com).

**SIGNED PROGRAM POLICIES AND REQUIREMENTS AGREEMENT**

This can be found as the last page of this document. A complete list of polices and agreements will be sent upon acceptance.

Mail forms to:

**Herbaculture Internship Program  
Herb Pharm  
PO Box 116  
Williams, OR 97544**

Email forms to [herbaculture@herb-pharm.com](mailto:herbaculture@herb-pharm.com).

You will receive an email confirming the receipt of your application shortly after its arrival.

Thank you in advance for your patience.

**Questions?** Contact - Emily Painter, Program Coordinator, at [herbaculture@herb-pharm.com](mailto:herbaculture@herb-pharm.com).

Please see our FAQ page on the website for more details about the program.





# herbaculture internship program

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Age \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Facebook URL \_\_\_\_\_

**(Or please include a picture of you at work or study.)**

Indicate the session(s) you are interested in and available for (rank by preference if interested in multiple sessions).

**Spring:** March 28-June 6

**Summer:** June 13-Aug 29

**Fall:** Sept 5-Nov 14

1. What or who is Herb Pharm to you?

2. Describe the program as you understand it.

3. Name any past interns you have met, worked with or are friends with. Do you know anyone else applying to program this year/for the same session (please indicate if you are a couple applying to the program together)?



## *herbaculture internship program*

4. This is a hands-on internship involving organic production-scale herb cultivation. Talk about your interest in organic production farming and medicinal herb cultivation.

5. The classes offered are designed for the newly budding herbalist. What has your herbal training been? Please list any classes, workshops, seminars, conferences, as well as your self-study.

6. What is a memorable experience you have had with a medicinal plant?

7. Please describe your interest in the scientific and energetic aspects of herbalism and health.

8. What formal education have you had beyond High School?

9. What are your short and long term career goals or your present focus?



## *herbaculture internship program*

10. What role do you feel participating in this program will enable you to play personally and within your community? Please include whom or what you consider as your community.

11. Our program includes hands on organic farm and gardening work in our herb fields, education garden and residences. Please describe your experience doing production work in a similar environment. Include familiarity with Good Agricultural Practices, experience doing precise, repetitive activities for at least two hours at a time such as harvesting, chopping, garbling, pruning, hoeing, transplanting. Indicate the type of weather in which you did these activities.

12. The hands-on part of this program includes bending, stooping, squatting, digging, hoeing, hand picking, pruning, clipping, chopping, lifting, and hiking for hours at a time. You will also be required to live in a group setting in close living quarters. Are you able to perform these tasks and live under these conditions?

13. Group living is a major part of this program. Our interns share a bedroom with 2 or 3 other students, are responsible for group food buying, menu planning and cooking healthy, nutritious shared meals. You will also be expected to maintain a high standard of neatness and hygiene in all areas of the house, medicine lab and grounds. What experience do you have living and working with others in a similar intensive arrangement; this can be another internship, AmeriCorps, school or sports, or any other situation in which you spent more than two weeks working with a group on a focused project.



## herbaculture internship program

14. The majority of your meals here will be shared. Because of limited kitchen space and intensive program schedule, we are unable to accommodate strict dietary restrictions and do not allow any extreme dietary practices such as fasting or detoxing while you are in this program. Are you comfortable and understand that if accepted you will be expected to honor our food policies? (For more details about the food policy, see the policies and requirements agreement)

**Yes I agree to the above requirement**

**No, I do not agree**

15. Some food will be purchased communally and typically feature vegetables, whole grains (including those with gluten), dairy and meats. Are you comfortable contributing at least \$150 per month, in cash (not food stamps), towards communal foods regardless of food preferences?

**Yes I agree to the above requirement**

**No, I do not agree**

16. Because of the nature of work on a production herb farm, FDA regulations require that certain contagious conditions be reported and may result in your departure from the program. These conditions include communicable disease (e.g. Tuberculosis, Pneumonia, Smallpox, MRSA, and Malaria, among others). If you have a communicable disease, we regretfully cannot consider your application. Do you understand the reasons for these restrictions and do you agree to inform Herb Pharm immediately if you suspect any of the above conditions?

**Yes I understand and agree to the above requirement**

**No, I do not understand or agree**

17. The Intern House is well equipped, but there are some things that you will need to bring with you, these include a sleeping bag, pillowcase and a warm washable blanket. The physical space that you will be sharing is limited and we ask that you not bring extra things with you into the household without prior approval from the program coordinator. Are you comfortable with these restrictions? *Note a packing list of things to bring will be sent to you after acceptance.*

**I am comfortable with these restrictions**

**I am not comfortable with these restrictions**

18. Due to the intense nature of this program, we ask that you do not plan outside activities during the week. This includes working, having guests, taking other classes and travel. Are you comfortable making this commitment?

**I am comfortable making this commitment**

**I am not comfortable making this commitment**



## *herbaculture internship program*

19. Please describe rules and agreements you have made in other similar programs and what challenges you have faced in abiding by them, as well as, what benefit you perceived from them.

20. What special talents, hobbies or interests do you have?

21. How do you plan on traveling here and what means of transportation will you be relying upon while here? Car? Bicycle? Walking?

22. Describe your personality and what role you typically play in groups.

23. Is there anything else that you would like to tell us about yourself to help us evaluate your application?



# herbiculture internship program

## PROGRAM POLICIES AND REQUIREMENTS AGREEMENT

### **A complete list of policies and requirements will be supplied upon acceptance to the program**

- We cannot accommodate pets, children or partners and require that you be fully engaged in all aspects of the program.
- Outside activities are limited to weekends when there is no class and no guests are allowed to stay overnight on weekdays.
- We cannot accommodate any strict individual dietary needs other than whole, natural, organic, ethically raised foods. "Strict" is defined as: you are at the risk of illness due to sensitivities around diet and/ or need separate pans, knives, cutting boards, etc. to accommodate your dietary needs. This includes, but is not limited to strictly raw, vegan, gluten free diets, and food allergies to common ingredients such as wheat, dairy, the latex group, garlic or onions. Vegetarianism is allowed, but you must be comfortable sharing a household with others who eat meat. We do not allow any extreme dietary practices such as fasting or detoxing while you are in this program.
- Due to nature of work on a production herb farm, we cannot allow anyone to participate who has been diagnosed with or suspected to have a communicable health condition (e.g. MRSA, Tuberculosis, Malaria, and Typhoid).
- Several low-dose, toxic, narcotic plants grow either wild or in cultivation here; none of these plants are allowed in the Intern House, Medicine Lab or grounds.
- All personal harvests on the farm premises must be with permission from the Farm Manager.
- Should any condition arise that would keep you from fulfilling your commitment to the program, you must notify the program coordinator immediately and understand that you may no longer be able to participate in the program.

**I hereby agree to release, hold harmless and indemnify Herb Pharm, its officers, directors, agents and employees from any and all damages or claims of any nature whatsoever arising out of my participation in this program.**

**I am aware that Herb Pharm is not establishing an employer/employee relationship with me. I have no expectation of receiving compensation for my participation in the program and no expectation of entitlement to a paid job at the conclusion of my internship.**

**I have read the above policies and requirements and agree to them if accepted.**

Signature

Date

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