

Date _____

**Grünewald Guild
Application for Volunteer Staff**

Name _____
FIRST MIDDLE INITIAL LAST

Present address (We will send all information to this address unless you indicate otherwise.)

STREET CITY STATE ZIP
Permanent address

STREET CITY STATE ZIP

Home phone _____ Work phone _____

Fax number _____ Email _____

Present occupation _____ Church affiliation _____

Have you been on staff at the Guild before? _____ When? _____

How did you find out about the Guild? _____

Have you ever been convicted of a crime? _____

I am available during this time period: _____

Signature _____

References

Please write the names and contact information for two people who can comment on your work habits and ability to serve. Print off copies of the reference form to give to them.

Name _____ Relationship _____

Home phone _____ Work phone _____

Fax number _____ Email _____

Name _____ Relationship _____

Home phone _____ Work phone _____

Fax number _____ Email _____

On the back of this form or on a separate paper, please respond to the following:

- Indicate your skills and experience that are appropriate to staff participation.
- Comment on any medical or dietary considerations of which we should be aware.
- Share with us any expectations you have for your time at the Guild, or any special reasons you have for wanting to be on staff.

MAIL APPLICATION TO:

Diana Leonard, Staff Coordinator, Grünewald Guild, 19003 River Road, Leavenworth, WA 98826

Phone: 509-763-3693 / Fax: 509-763-3693 / Email: diana@artfaith.com / www.artfaith.com

Grünewald Guild
General Information for Volunteer Staff Applicants

Age limitation: Volunteer staff must be 18 years of age or older.

Commitment: During your stay at the Guild, your commitment is to serving the needs of the community that is comprised of staff and guests.

Work/study option: Work involves assisting core staff in maintaining the physical plant (housekeeping, maintenance, kitchen duties, etc.) for 4-5 hours per day in order to cover expenses of room and board. According to what is scheduled, our distinguished art programming may provide an opportunity for a work/study arrangement. Under this arrangement, you may take workshops tuition-free and only pay the cost of materials.

Housing: Housing is dependent upon the ever-changing community and will be arranged by the Staff Coordinator.

For general information about what to expect during your term of service at the Guild, please contact office@artfaith.com.

Dear Applicant,

Two references are required to complete your application for summer staff at the Grünewald Guild. You may choose whether to have access to this information by completing and signing the statement to the right.

I waive my right to view this reference.
 I do *not* waive my right to view this reference.

Applicant's signature

Grünewald Guild Reference Form

Applicant's Name _____

The person named above has applied to serve as a member of the summer community at the Grünewald Guild. Your open and honest responses to the questions below will help us in being sensitive to the applicant's abilities and needs, in making preliminary work assignments and in trying to make their experience a rewarding one.

The mission of the Grünewald Guild is to awaken the creative spirit through art, faith, and community. In the summer, we offer week-long studio art courses to a summer community of approximately 30 to 50 guests and staff. We ask our staff to commit to a minimum of 3 weeks' service. The work they typically perform requires a mixture of hospitality and 4 to 5 hours of physical labor per day, working in the kitchen or doing gardening, housekeeping and similar tasks. For more detailed information, visit www.artfaith.com.

Please answer the following questions, using additional sheets as necessary. Thank you for your assistance!

1. How long have you known the applicant and in what capacity?
2. Have you ever been to the Grünewald Guild? If so, in what capacity?
3. Please comment on the applicant's level of responsibility, dependability and self-motivation. Is s/he able to work well alone?
4. Please comment on the applicant's ability to serve, to work cooperatively and to communicate with people of varying ages and backgrounds.
5. What do you feel the applicant would contribute as a member of our community? What would s/he gain?
6. Additional comments are welcome. Please describe any notable abilities, interests, skills or experiences. Can you think of any reason why we should not accept the applicant into our community?

Signature _____ **Date** _____

Please print

Name _____

Address _____

Telephone _____ **Email** _____

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