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APPRENTICE APPLICATION

Please do not fill this out until you have read a description of the apprenticeship that you are applying for. You can read it on our website or contact us and we can send it via email or mail.

Name

Phone

Mailing Address

Best time to call

E-Mail

Availability: Start Date

End Date:

Describe the type of work and skills which you are most interested in learning while working with us:

Please list the schools you have attended, degree and or major areas of study and or training

Please attach a resume, or provide a list of work experience, both paid and volunteer.

Do you smoke?

Do you have transportation?

Can you lift and carry 50 pounds?

Do you have any relevant medical conditions or physical limitations that would affect your ability to do farm work (kneeling or squatting for hours, heavy lifting requirements, long days, etc)?

Special Interests:

Other considerations?

Please share a few interesting things about yourself.

Please share a few things people should know about working with you.

References:

Work reference

email

phone

Personal reference

email

phone