

Application for Byers Scholarship 2008

Seasonal Position with the Henry's Fork Foundation

Name: _____

Date: ____/____/____

Mailing Address: _____

Telephone number: _____

Position of Interest: _____

(Note that HFF only accepts applications for positions for which there are openings)

Date Available to start work: ____/____/____ _____

Educational Background	Name/Location of School	Grade Completed/Degree
High School Trade School College (Undergraduate) College (Graduate)		

Note areas of emphasis, special studies or skills developed relevant to the position.

Are you legally able to work in the United States? **Y** **N**

Current Employment if any: _____

May we contact your current employer? **Y** **N**

If so, provide supervisor's name and phone number. _____

Former employment (starting with most current):

Date: From ____/____ To ____/____ Employer's Name _____ Address _____ Phone _____ Position _____ Salary _____ Reason for Leaving _____ _____ _____	Date: From ____/____ To ____/____ Employer's Name _____ Address _____ Phone _____ Position _____ Salary _____ Reason for Leaving _____ _____ _____
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Date: From ____/____ To ____/____	Date: From ____/____ To ____/____
Employer's Name _____	Employer's Name _____
Address _____	Address _____
Phone _____	Phone _____
Position _____	Position _____
Salary _____	Salary _____
Reason for Leaving _____	Reason for Leaving _____
_____	_____
_____	_____

Additional References: (those not related and who have known you at least 3 years)

Name	Address	Business	Phone	Years Known

Based on the published job description for this position, will you be able to perform the essential functions of the job without reasonable accommodation? **Y N**

If no, describe the nature of accommodation required for you to perform the required tasks.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts will be cause for dismissal. Further, I understand and agree that my employment would be for no definite period, and may, regardless of the date of payment of wages or salary, be terminated at any time without any previous notice.

Date: _____ Signature: _____

***PLEASE INCLUDE A LETTER OF INTEREST EXPRESSING YOUR DESIRE TO BE CONSIDERED FOR THE SCHOLARSHIP AND A RECOMMENDATION FROM TEACHER/SUPERVISER.**