



Youth Farm Internship
Application and Position Description

Mission: Victory Garden Initiative builds communities that grow their own food, creating a community-based, socially just, environmentally sustainable, nutritious food system for all.

Applicant's Information

Participant's Name (First and Last)		Age:	DOB:
Address:			City, State, Zip:
Parent/Guardian Name(s)			
Phone:	Email:		
Emergency Contact Name:			Phone:

Reports to: Roxanne, Youth Educator and Beverly, Education Programs Manager

Location: The Youth Farm Internship will take place at the Victory Garden Urban Farm, located in the Harambee neighborhood at 220 E. Concordia Avenue, Milwaukee, Wisconsin.

What to Expect: Youth interns will:

- have a chance to get their hands dirty while being outside in the fresh air;
- connect to a local food source while learning how their food grows;
- taste vegetables and understand why they are nutritious for our bodies;
- plant seeds and watch them grow throughout the summer;
- create their own compost bin to use in their kitchen at home;
- have fun while learning with games and activities
- gain leadership experience and work ethic while harvesting food, pulling weeds, and participating in activities;
- earn a weekly stipend (money) based upon hours and days worked.

Schedule and Hours: Interns are expected to work 2 days during the week for at least 4 hours each day. They will also be part of the FarmStand and possible Farmers Markets. The days and times have not been set yet.

Program Expectations and Commitments:

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| <ul style="list-style-type: none"> ● To show up every day on time as scheduled (absences must be reported in advance with Youth Educator) ● To actively listen ● To compost at home ● To participate fully with every activity ● To act respectfully to everyone ● To work the farm, which includes weeding, planting, and other dirty work. ● To have the ability to travel to Farmers Markets in local areas (this will be discussed prior to any Farmers Market scheduling). | <ul style="list-style-type: none"> ● To be a positive role model to friends, family, and neighbors. Being a positive role model includes eating healthy, taking care of the environment, and helping each other. ● To work hard and be motivated ● To have a positive attitude ● To be honest ● To handle all food and equipment properly ● To respect the land and not litter on it ● To not use cell phones or iPods at work ● To not leave work without notice ● To not steal, vandalize, fight, or commit verbal abuse ● To not have, deal or be under the influence of drugs ● To not have a knife or gun |
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Help us learn about you:

Why are you interested in becoming the Youth Farm Intern?

What do you hope to get out of working on the farm?

What unique gifts would you bring to the farm?

If you could change anything about your community, what would it be?

What is your favorite food and why?

What do you want to be when you grow up? Why?

General Health: Do you have any of the following?

Condition	YES/NO	Specific Information Related to Condition
Food Allergies		
Seasonal Allergies		
Asthma		
Other injuries or conditions		

What is RISK?

Risk simply means that there is a possibility that something bad could happen, you could become injured or you could injure someone else.

What are my RISKS when working as a Youth Farm Intern?

Working in a garden involves working with tools like rakes, shovels and wheelbarrows. Working with tools and being physically active in a garden environment means that there is the possibility of being injured or unintentionally hurting someone else.

How can I protect myself and protect other people?

Listening to the staff from Victory Garden and following the ground rules are important for keeping yourself safe and keeping your fellow classmates safe too! Respect your teacher; always look around you when you are using tools. Be aware of your environment and slow down when you are using a wheelbarrow or a shovel. Take care of yourself and show that you care about your friends when you work in the garden by respecting the soil, respecting the plants and respecting your fellow workmates!

I understand that there are risks to working in the farm stand program. I agree not to hold Victory Garden staff responsible for any injury that may result from me working at Victory Garden Urban Farm or Farmstand. I understand that this form is voluntary and that it releases Victory Garden Initiative from any liability in the event that I am injured while participating in the Youth Farm Intern Program.

I agree to the schedule, program expectations, and commitments.

I have permission from my parent/guardian to participate as a Youth Farm Intern for the entire summer.

Print your name here

Sign your name here

Date

Have your parent/guardian fill out the next page.

Youth Farm Intern Parent/Guardian Permission

Parents/Guardians, please fill out this page and send with your child to the first day of the internship. Thank you!

Permission:

I give permission for _____ to attend and participate in Victory Garden Initiative Youth Farm Intern program, starting June 1st through August 31st.

Health Agreement:

I agree that _____ is good health and has no physical condition that would participation at the Farm.

Hold Harmless:

I understand that participation in the activity involves a certain degree of risk. I have carefully considered the risk involved and have given consent for myself or _____ to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I agree to release Victory Garden Initiative, its agents, its employees, and its certified volunteers from and against any claim arising from my or _____ participation in the Youth Farm Intern Program. I agree to indemnify and hold Victory Garden Initiative harmless from and against any claims, whether caused by passive negligence or otherwise. I will pay all costs incident to any claim, including, without limitation, attorneys' fees. I agree that this agreement is intended to be as broad and inclusive as is permitted by the law of the State of Wisconsin.

In Case of Emergency

In case of emergency involving _____, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose to the adult in charge examination findings, test results, and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

Photograph and Media Release

I agree that photographs, slides, movies or videos of _____ in connection with participation in this event or activity without compensation from Victory Garden Initiative (or Permittee/Sponsor) and consent to the use of these photographs, pictures, slides, movies or videos for any legal purpose.

I attest that I am signing this voluntarily.

Parent/Guardian Print Name

Signature

Date