

Ríck & Laura Steere 136 Joppa Rd Rídgeway, VA 24148 276-358-2378 <u>infinityacresva@gmail.com</u> <u>www.InfinityAcres.org</u>

The Mission of <u>Friends of Infinity Acres Ranch</u> (FOIAR) is to provide educational and interactive opportunities for the community utilizing Animal Assisted Therapies and Interactions. FOIAR provides programs for the public and specializes in services for individuals with disabilities using domestic and exotic animals to encourage physical, emotional, and psychological well-being. FOIAR is an equal opportunity employer.

2024 United Way Internship Grant Application

Α.

Infinity Acres Ranch is offering a 2-month paid internship during June and July to 2 high school / or freshman college students. The individual will work an average of 5 days a week for 6 hours a day, with a flexible schedule for 8 weeks. The interns will learn animal husbandry, handling and training skills while assisting with community events, administrative tasks, and summer camps at the ranch. Upon successful completion, the individual will be awarded a \$3000 stipend.

Personal Information			
Full Name:	Today	y's Date:	Date of Bírth:
Street Address:	Cíty:	State:	Zíp Code:
Home Phone: ()	Cell Pho	me: ()	
Are you a United States citizen	or legally eligible	to work in the T	U.S.? Yes No

Have you been charged or convicted of a misdemeanor or felony? If so, please explain.

No\_\_\_\_\_ Yes\_\_\_\_\_ & \_\_\_\_\_

Please indicate whether you hold the following valid driver's license.

Class A:	Class B:	Class C:
Dríver's Lícense Number:		State Issued:

Are you currently CPR and First Aid Certified? \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_\_ Expiration Date

	_	_	_	_
2024 Hatta	ITALATE	Intownalo	Amplication	Amalian the Manage
2024 00000		internsnin	ADDIICATION	ADDUCADI NAME
	uy	meermomp	Application	Applicant Name_

## Education

High School:	Grade	Current GPA:
Díploma Type:		
Additional Schools or	Programs (If applical	ble):

\_\_\_\_\_

**References:** Please list name of supervisors, managers, or others who can comment directly on your abilities:

Name:	Address:	Phone #:	Relationship	Years Known
	C.		100	and the second
51	Jin,			
0		20		
			61 65	
Our stars March T	and and and a data of	an additional page	16 mar 10 mar	
			N/I DE	
Employer:		Dates En	nployed:	63
		lephone:		<i>j</i> :
Job Dutíes:				
Address:				
Employer:		Dates En	nployed:	
Job Títle:	Te	lephone:	Weekly Pay	J:
Job Duties:				
Reason for Leavír	ıg:			
Address:				

Describe your qualifications for this internship position: (Include skills, training, etc.)

Please list any special awards, scholarships, honors, offices, or club positions held:

Describe your future after high school: (Include career, college, etc.)

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if chosen, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make with all my personal references.

Signature of applicant

Date

Prínt Name

Signature of guardian (if under 18)

Date

Date