

Application for Work Exchange

Period Applying for:

Please give two choices in order of preference:

From: (mo/day/yr)_____ to (mo/day/yr)_____

From: (mo/day/yr)_____ to (mo/day/yr)_____

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Message Phone _____

E-Mail _____

Are you 21 years of age or older? Yes ___ No ___

1. What is the condition of your health (physical, emotional and mental)?

2. Is there any aspect of your physical, emotional or mental health that would be restrictive in your daily life at the Center?

3. Have you ever been convicted of a criminal act? Yes ___ No ___

Explain: _____

4. Please provide two references of people that are able to evaluate your readiness for the Work Exchange program. For instance, a present or recent employer, a spiritual director, a teacher/mentor, a pastor.

a. Name _____

Address _____

City, State, Zip _____

Phone _____ E-Mail _____

Relationship _____ Years Known _____

b. Name _____

Address _____

City, State, Zip _____

Phone _____ E-Mail _____

Relationship _____ Years Known _____

Please provide the same contact information for your two closest relatives or friends.

a. Name _____
Address _____
City, State, Zip _____
Phone _____ E-Mail _____
Relationship _____ Years Known _____

b. Name _____
Address _____
City, State, Zip _____
Phone _____ E-Mail _____
Relationship _____ Years Known _____

Emergency Contact:

Please provide the Name, Address, Phone, and Relationship of those who should be contacted in case of emergency, in the order of preference in contacting:

1. Name _____
Address _____
City, State, Zip _____
Relationship _____
Phone _____ E-mail _____

2. Name _____
Address _____
City, State, Zip _____
Relationship _____
Phone _____ E-mail _____

Please attach the following to your application:

- a. A resume listing your education and work experience.
- b. A page describing your intention and focus for participating in the Work Exchange program.
- c. A page sharing about what you enjoy doing.

Applicant's Signature: _____ Date _____

Mail this form with requested accompanying information to:
The Christine Center
c/o Director
W8303 Mann Rd
Willard, WI 54493

PROGRAM GUIDELINES AND AGREEMENTS FOR WORK EXCHANGE

MAIL - Outgoing mail may be put in the large black mailbox on Mann Rd. The mail carrier arrives between 12:00 p.m. and 2:00 p.m. Incoming mail will be placed in your mail box or Guest mail box in the main office.

COMPUTER USE - You may access your email account on the computer in the library, or you can bring your own laptop and use it in the library. If using any programs with sound, please use earphones. If a guest is in need of the computer, please reschedule your time to use it.

TELEPHONE - The phone in the Bookstore is available for use with a phone card, or local calls only.

TELEVISION - The television in the Pines Room is available for use in the evening for viewing DVDs, unless there are programs and/or retreats at the Center. The television is for the Center's ministry and, therefore, does not function for television programs.

CAR USAGE - If you did not bring a car and need to use one, please speak to your supervisor. You will be responsible for any gas used and any damage that may happen to the vehicle during your time of using it. Use of a car is at the discretion of your supervisor.

KITCHEN - If you are not going to be present for a meal, please let the cook know in advance. Fruit and hot water for tea will be available in the dining room. For access to the kitchen, permission from the cook is required. The kitchen is closed from 7:30 p.m. to 7:00 a.m. Three meals are provided each day.

LAUNDRY - A coin-operated washing machine and dryer is available. The cost is \$1.00 for the dryer and \$1.25 for the washer. It is your responsibility to supply your own detergent and to wash your bed linens.

HERMITAGE OR GUEST HOUSE - Living accommodations may vary with the needs of the Center. It is your responsibility to maintain a clean and wholesome living space. Sometimes it may happen that when we have a large number of guests you may be asked to share a hermitage or to lodge elsewhere.

LOCKERS - There are lockers in Siloe, which is a bathroom, shower and laundry facility, where you can keep some of your personal care items.

SUBSTANCE ABUSE - The Christine Center including its buildings, grounds and property is a smoke-free environment. The use of illegal drugs will result in termination. Use of alcohol is discouraged.

WORK - Check with your supervisor regarding your work assignment. Work includes 35 hours of work per week with two days free per week.

Additional time or time away is allowed with prior arrangement.

Work Exchange persons will be responsible for the financial cost of any damage done to the property of the Center and/or its environment.

Introductory term:

One month ending with a discernment process to determine the value of Work Exchange for the individual participant and The Christine Center.

Intermediate term:

Three months ending with a discernment process.

Long term:

One year with an annual discernment process.

As a participant in the Work Exchange program, I agree to follow the guidelines as stated above.

Participant: _____ Date: _____

Work Study Director: _____ Date: _____

The Christine Center reserves the right to conclude this agreement at any time.

Return to:

Director
Christine Center Programs
W8303 Mann Road,
Willard, WI 54493
Phone: (715) 267-7507
Fax: (715) 267-7512

Toll Free: (866) 333-7507

Email: christinecenter@tds.net