

Herbal Apprenticeship Programme Application Form 2011



Please fill out this application and mail to : Phytofarm, 166 Okuti Valley Road, Little River 7591

Name: Date: Date of birth:

Phone(s): E-mail: Please print clearly

Permanent Address:

1. How did you find out about Phytofarm Apprenticeship Programme? Internet? Personal Contact? Who?
2. How do you think this programme will help you to meet your personal and/or career goals?
3. What herb related knowledge or experience do you have (i.e., classes, employment, correspondence courses, or personal home study)?
4. Please describe any experience you have had gardening, working on a farm or doing production landscape work.
5. Active gardening and farm work is an important part of this programme. This may include bending, stooping, squatting, digging, hoeing, lifting, etc. for an extended period of time. You will be expected to participate in the full range of garden, field and landscape activities. Please describe any difficulties may have that would limit activity.
6. Weather can be cold and wet in spring and autumn sessions and hot in the summer. Please list any experience you have had with physically demanding work under these conditions.

7. Work on the farm and in the garden involves working in and around a wide variety of plants and grasses. Do you have any known allergies that might limit your ability to work safely in this environment?
8. Please rate the following topics in order of interest: (1 being of most interest)
- Conservation of Medicinal Plants
 - Growing Herbs for Market, culinary or other
 - Making Plant Medicine
 - Nutrition for health
 - Growing plants for market
 - Holistic Healing
 - Native Plants
 - Making organic products, ferments, natural sprays etc
 - Making a display garden, teaching, education, writing
9. Do you have transport to get and from Little River?
10. Does your life and work commitments allow for you to stay in Little River during the seasonal classes? Yes/No
11. Would you prefer to commute daily to Little River during class days? Yes/No
12. Are you agreeable for your contact details to be shared with other students on the programme? Yes/No
13. Are you interested in being on a waiting list if the program is filled? Yes or No

