



Fellowship  
Community

RUDDOLF STEINER FELLOWSHIP FOUNDATION INC.  
**CO-WORKER APPLICATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Cellphone: \_\_\_\_\_ (Text? Yes/No \_\_\_\_\_)  
Email: \_\_\_\_\_ Social Media site: \_\_\_\_\_ (not required)

How did you hear about the Fellowship Community?

Why do you want to come to the Fellowship Community?

241 Hungry Hollow Road, Chestnut Ridge, NY 10977  
Office - 845-356-8494 (ext. 2) Fax- 845-356-8468  
email: [rsffoffice@fellowshipcommunity.org](mailto:rsffoffice@fellowshipcommunity.org)  
[www.fellowshipcommunity.org](http://www.fellowshipcommunity.org)

If employed, what is your anticipated length of stay? (Every Co-Worker needs are different and can change, this is a general idea of length of service) \_\_\_\_\_

Please give us the name & address of a relative or friend through whom you may always be contacted:

\_\_\_\_\_, Contact number: \_\_\_\_\_

As many tasks at the Fellowship Community require at times strenuous physical activity (lifting, moving bags/boxes, etc.) please describe your gestate of health (A medical exam is required if you join the Fellowship Community):

Below please give chronological listing of educational and work experiences since high school.

High school leaving date: \_\_\_\_\_ Graduated? \_\_\_\_\_

Education experience:

1. \_\_\_\_\_ Year(s) attended: \_\_\_\_\_ Graduated/Degree? \_\_\_\_\_

2. \_\_\_\_\_ Year(s) attended: \_\_\_\_\_ Graduated/Degree? \_\_\_\_\_

3. \_\_\_\_\_ Year(s) attended: \_\_\_\_\_ Graduated/Degree? \_\_\_\_\_

4. \_\_\_\_\_ Year(s) attended: \_\_\_\_\_ Graduated/Degree? \_\_\_\_\_

Work Experience:

1. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

2. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

3. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

4. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

5. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

6. \_\_\_\_\_ Year(s): \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

What skills do you bring with you that may be applied in our community?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

Have you ever lived “in community” before?

Do you have experience caring for the elderly, handicapped, etc.?

To what extent are you acquainted with Rudolf Steiner’s work?

What interests do you have that might be developed further in this community?

Have you had experience on other spiritual paths? Please share them with us. Are you still active with them?

What do you view as the purpose of your life?

What is your current employment? Why do you wish to make a change?

What skills do you have which you would like to share in a community?

What new areas would you like to explore? What new skills would you like to acquire?

What is your view of drug use and alcohol use? Do you use them?

Do you require a special diet?

Is there any kind of work in the community you would not want to do?

Please give two references we may contact who are not relatives. State your relationship to them. Please provide at least one employment reference. We will only contact these references if you are tendered a conditional offer of employment

1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship & Experience: \_\_\_\_\_

2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Relationship & Experience: \_\_\_\_\_

Please write a brief biographical sketch. Include any previous community experiences, interests, or work in anthroposophy or other spiritual movements, interest or experiences in working with older people or handicapped:

If we accept your application after reviewing, a member of the Community will contact you for a phone interview to discuss your interest more personally. We may extend an invitation to join us for a “work-a-long” where you would spend a few days to a week working alongside co-workers, getting to know the community and us you.

Please return this form to:

Ann Scharff, c/o The Executive Circle  
The Rudolf Steiner Fellowship Foundation  
241 Hungry Hollow Road  
Chestnut Ridge, NY 10977  
Phone: (845) 356-8494 X 236 - Fax: (845) 356-8468  
RSFFOffice@FellowshipCommunity.org  
www.FellowshipCommunity.org