Vocational Fellowship Organization Application

Organizational Contact				
First Name	Last Name		Phone #	
Organization Information				
Organization Name				
Organization Address		City	State	Zip
Submit a Job for the Young	Adult Vocational Fellow	ship		
Job/Fellowship Title				
Job Description				
Desired Skills/Lived Experien	nce			
Required Skills/Lived Experi	ence			
Age Requirement	This role is:	Cities fello	ow can live in:	
Transportation Requirement public transportation an opti		n car, do they live	on site and do	n't need transport, is
-				
Job Duration	Start Date		End Date	

10 PTO c Comp da 1 day off 1 hour pe 6 hours t 3-4 days	days and at least 4 paid holidays ays for overtime worked for participant development week allowed for cohort meeting throughout the course of the year for do off for mid-year retreat with other fell insurance (if not, ELCA will provide based to the second of the second of the year for do off for mid-year retreat with other fell insurance (if not, ELCA will provide based on the second of the year for do off for mid-year retreat with other fell insurance (if not, ELCA will provide based on the second of the year for the	nt and formation liscernment coaching ows
Supervisor		
Supervisor First N	Name S	Supervisor Last Name
Supervisor Bio	*pleas	se attach a supervisor head shot along with this form
Inclusion		
What are the phys	sical requirements of this job?	
	ion able to provide accommodations for or will take to ensure this support?	or people with disabilities? What steps has your
and		ke in trainings on anti-racism, gender and sexuality, re willing and able to participate in these and other

Is your organization able to provide accommodations for people with disabilities? What steps has your organization taken or will take to ensure this support?