

**Bakersfield Youth Jobs Program
Kern Community Foundation
Fellow Position 2025
Application Packet**

KERN COMMUNITY
FOUNDATION

Growing community.
Growing philanthropy.

Application Process

Applications are due on Friday, January 17, 2025, at 11:59:59 PM PST. The hiring process will include a review of your application, resume, and a 30-minute interview.

Compensation

The Intern will be paid \$25.00 an hour and provided bus passes upon request.

Submission and Questions

Applications are due to Program Manager Olivia Kent by **January 17, 2025, at 11:59:59 PM PST**. If you have any questions, please reach out to the Kern Community Foundation at 661-325-5346. Please email your application as one Microsoft Word or PDF packet to olivia@kernfoundation.org. If you plan to mail or drop off your application, please send it to:

ATTN: Rashha Rohina
Kern Community Foundation
5701 Truxtun Ave, Suite 110
Bakersfield, CA 93309

2. Application Form

Section A: Applicant Information

Last Name**First Name****M.I.**

Address**City****ST****ZIP****Date of Birth (MM/DD/YYYY):** _____**Income Level:**

Annual Household Income: _____ Household Size: _____

Academic Plans (Please select all that apply): College / University Trade School Other Postsecondary Program Not Sure**Career Plans (Please select all that apply):** Public Service / Government Private Sector Non-Profit Not Sure

Post-Secondary Institution Information

College/Institution Name: _____

Major / Specialization: _____

Anticipated Year of Graduation: _____ GPA: _____

Class Level: Freshman Sophomore Junior Senior Graduated

Professional Certificates/Trainings

Please list any professional certificates received or training programs completed.

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Hard Skills (Please circle all that apply):

- Microsoft Word Microsoft Excel Microsoft PowerPoint
- Adobe Products Mapping Software Social Media Experience
- Coding Data Visualization Website Creation

Soft Skills (Please circle all that apply):

- Time Management Active Listening Organized
- Public Speaking Great Communicator Detail-Oriented
- Customer Service

Emergency Contact Information

Name

Phone

Email

Section B: Short Response

Personal Statement: Why are you interested in the Kern Community Foundation Fellowship position? What role do you believe non-profits play in Kern County? What do you hope to gain from this opportunity? *(500 words or less)* **Please note that if we discover the use of ChatGPT in this application, you will be disqualified.**

3. Recommendation Form

Applicant: Please fill out the first two lines of this recommendation form and give it to an employer, coach, mentor, or advisor to submit on your behalf. Be sure to give them enough time to submit a great recommendation and follow up to make sure they submit it before Tuesday, January 21, 2025, deadline. Letters cannot be from family members.

Recommender: Thank you for taking the time to complete this form. Please fill out the "Requested Information" and send the completed form to olivia@kernfoundation.org before Tuesday, January 21, 2025. Please contact Olivia Kent from the Kern Community Foundation at olivia@kernfoundation.org if you have any questions. If you wish to mail the recommendation, please ensure it is post-marked by 5 PM, Tuesday, January 21, 2025, and mailed to:

ATTN: Rashha Rohina
 Kern Community Foundation
 5701 Truxtun Ave, Suite 110
 Bakersfield, CA 93309

Applicant Information (*Applicant Fills Out*)

Last Name	First Name	MI
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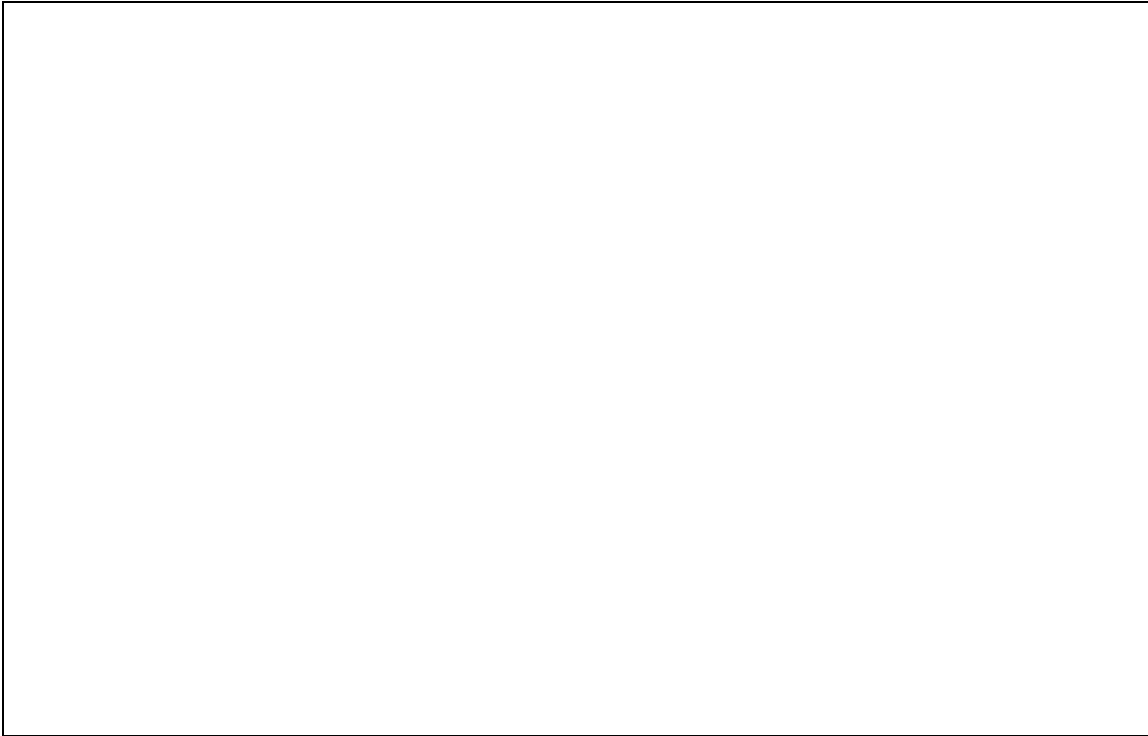
College / Institution Name	Year / Status
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Requested Information (*Recommender Fills Out*)

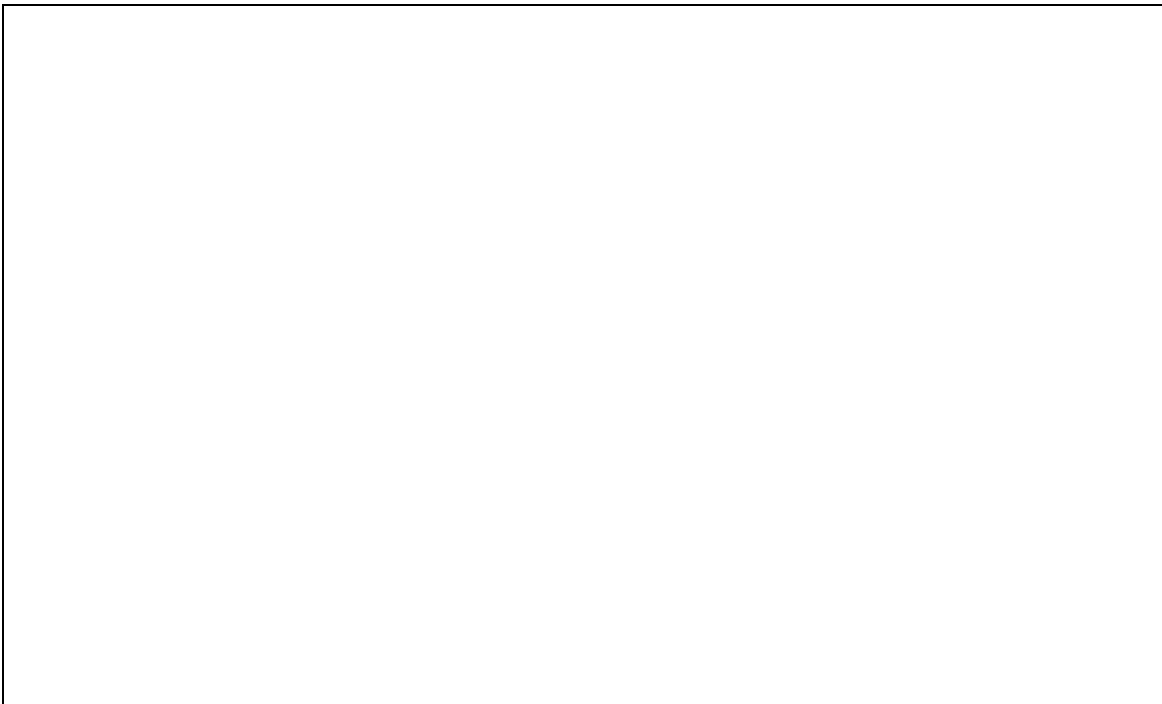
Last Name	First Name	MI
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Title	Phone	Email
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1. How long have you known this applicant and in what context? *(300 words or less)*



2. What first words come to mind when describing this applicant, and why? *(300 words or less)*



3. On a scale of 1 to 7, how strongly would you recommend this student for the City Hall Fellowship Program:

 1 2 3 4 5 6 7

Do Not Recommend

Neutral

Strongly Recommend

4. Additional Comments:

Printed Name

Date

Signature

Date

4. Certification

I, _____, understand that any misstatements, misrepresentations, or omissions of fact contained herein may be grounds for denial or termination of Intern placement.

Printed Name

Date

Signature

Date