



workshops, and starting a cooperative business. WHEN? Program 5-10 hours a week during the Spring and Fall and 20-30 hours a week during the summer.

WHERE? Based at Pleasant St, Worcester

WHO? A program of the Worcester **Roots Project**



CONTACT: Worcester Roots Project

Phone: (508) 579-6916 ~ www.WorcesterRoots.org ~ Sarah@WorcesterRoots.org Hablamos Españo e falamos Portugês et nous parlons Français

Mail or Drop off: 4 King Street Worcester, MA 01610

Keep this top piece for your records.					
×	Toxic Soil Bus	sters Cooperativ	Application		
Full Name	Nickname		Date of Birth		
School	Grade	Gender	Name of Guardian/Parent		
Address			Language(s) Spoken at Home		
Home Phone Number	Cell Phone		Parent's Work Number		
What is unique about you? Any	y special skills or talen	ts? What would you l	oring to our group?		
Have you ever experienced op	pression?				
Do you work better alone or in	a group and why?				

Describe an ideal work environment.
Do you speak any languages besides English? If so, what language(s)?
Do you have any additional questions, comments, concerns about us?
Please tell us why you want to be a Toxic Soil Buster:
Why do you think you should be accepted into the Toxic Soil Busters program:
To be in the Toxic Soil Busters Cooperative, you need to commit to coming to the program two days after school or on the weekend and three days each week throughout the summer. Are you willing to make that commitment? Y N
Are you up to the challenge of dealing with toxics, doing physical labor, and working as a team: Y N
How did you hear about this opportunity?
To complete the application process, you need to attend an interview. We will call you to schedule an interview.

Mail in completed application 5 Pleasant St #3, Worcester, MA 01609 Call 508-343-0872 with questions, hablamos Español e falamos Português et nous parlons Français