



Internship Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Availability

During which hours are you available?

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons
 Weekday evenings Weekend evenings

Interests

Tell us in which areas you are interested in:

- Garden and Grounds
 Collections
 Development/Grants
 Fundraising
 Events
 Office Assistant
 Programs & Outreach
 Visitor Services

Special Skills or Qualifications and Schooling

Summarize special skills and qualifications you have acquired from your school, employment, previous volunteer work, or through other activities, including hobbies or sports.

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Previous Volunteer or Internship Experience

Summarize your previous volunteer or internship experience. If none, please tell us what you hope to learn.

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as an intern, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in our internship program.