

INTERNSHIP APPLICATION FOR SUMMER 2003

APPLICANT'S NAME _____ BIRTH DATE _____

PERMANENT ADDRESS: _____
STREET CITY

STATE ZIP PHONE

CURRENT ADDRESS: _____
STREET CITY

STATE ZIP PHONE

E-MAIL ADDRESS _____

EDUCATION

DATES ATTENDED NAME OF EDUCATIONAL INSTITUTION DEGREE/DIPLOMA EARNED, OR GPA

Course work in botany, horticulture and/or environmental studies:

DATE NAME OF COURSE GRADE EARNED

EMPLOYMENT including volunteer experience:

START/END	NAME OF EMPLOYER	REASON FOR LEAVING
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MEMBERSHIPS including positions held, if any:

Special interests and/or honors:

Current Career Goals:

Why are you applying for this internship?

I certify that the information on this application is complete and correct.

Signature of Applicant

Date

This Application Must Be Received By FEBRUARY 14, 2003

PLEASE MAIL THIS APPLICATION FORM TO:

Education Department
Bowman's Hill Wildflower Preserve
P.O. Box 685, New Hope, PA 18938

Bowman's Hill Wildflower Preserve is managed by the Bowman's Hill Wildflower Preserve Association, Inc., in cooperation with the Pennsylvania Historical and Museum Commission.