

THE ELIZABETHAN GARDENS

INTERNSHIP APPLICATION

Name:		
Current Address (line 1):		
Current Address (line 2):		
City:	State:	Zip:
Cell Phone:	Email address:	
<i>Dates during which you can be reached at this address:</i>		
Permanent Address (line 1):		
Permanent Address (line 2):		
City:	State:	Zip:
Home Phone:	Alternate Phone:	
School:		
Major:	Degree (to be) earned:	Expected Date of Graduation:
<i>(Only current college/university students and recent graduates are eligible)</i>		

Please choose any available start date and the internship duration(s) in which you are interested.
What date(s) are you able to begin: ***How long would you like to stay:***

	May 15
	June 5
	September 3

	3 months
	1 year

Please list names, addresses, phone, and fax numbers of individuals from whom you have requested the written references: All references must be in English.

1. Name:		
Address:		
City:	State:	Zip:
Phone:	Alternate Phone:	

2. Name:		
Address:		
City:	State:	Zip:
Phone:	Alternate Phone:	

Do you have a valid driver's license?

A valid driver's license is required for all internships. Exceptions may be granted on a case-by-case basis for disabled applicants otherwise qualified for the program.

Are you a citizen of the United States?
documentation.

If not, please provide your visa status with

How did you learn of the Internship Program? Please provide name and address of the person who referred you.

Name:

Address:		
City:	State:	Zip:
Phone:	Alternate Phone:	

<input type="checkbox"/>	Friend/Relative who visited the Gardens	<input type="checkbox"/>	Newspaper/Magazine
<input type="checkbox"/>	Personal visit to the Gardens	<input type="checkbox"/>	High School Teacher/Advisor
<input type="checkbox"/>	College Professor/Advisor	<input type="checkbox"/>	Internet
<input type="checkbox"/>	Former Student	<input type="checkbox"/>	_____
Other			

A COMPLETED APPLICATION SHOULD INCLUDE:

1. The application form.
2. A copy of your résumé.
3. A statement of your professional objectives (approximately 200 words).
4. Official transcripts of all college courses (must show cumulative GPA).
5. A reference from your academic advisor (or professor) regarding your scholastic achievements and potential as an intern (must be enclosed in a sealed envelope with your advisor's signature over the flap).
6. A reference from a current or former employer, preferably from within your field of interest (must be enclosed in a sealed envelope with your employer's signature over the flap).

Please send items 1-3 together. Please have transcripts sent directly to the address below.

Recommendation letters may either be e-mailed to director@elizabethangardens.org or mailed to the address below.

ONLY COMPLETED APPLICATIONS RECEIVED BY THE APPLICATION DEADLINE WILL BE CONSIDERED.

I certify that all of the above information is true and correct.

Signature: _____ Date: _____

Please print the application form, sign it, and mail the application to the address below.

Openings may exist after the application due dates. Please call 252-473-3761 for current openings.

SEND TO:

Carl V. Curnutte III
The Elizabethan Gardens
1411 National Park Drive
FAX: (252) 473-3244
EMAIL: director@elizabethangardens.org