

**INTERNSHIP PROGRAM APPLICATION HORTICULTURE**  
**Department of Horticulture**  
**Room 316 Plant Science Building**  
**University of Arkansas**

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**Submission Deadlines**

<u>Semester of Internship</u>	<u>Submission Deadline</u>
<input type="checkbox"/> Summer _____	April 15
<input type="checkbox"/> Fall _____	July 15
<input type="checkbox"/> Spring _____	November 15

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Name: \_\_\_\_\_

Fayetteville Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_Permanent or Home Address (if different from above): \_\_\_\_\_ Phone: \_\_\_\_\_  
 \_\_\_\_\_

Date Application Submitted: \_\_\_\_\_ Date Application Reviewed: \_\_\_\_\_

HORT Major: \_\_\_\_\_ Concentration: \_\_\_\_\_

Credit Hours Completed: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Academic Advisor: \_\_\_\_\_

Horticulture Internship for which you are applying (please check appropriate):

- HORT 462V Horticulture, Landscape, Turf Internship

Advised by: \_\_\_\_\_

Number of Hours for which you seek credit: \_\_\_\_\_ (maximum of 3 per semester)

- ➡ Please attach an unofficial transcript of your previous course work.
  - ➡ Please attach a current copy of your resume and a copy of the cover letter which you have sent to the Internship Provider.
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