



ALABAMA DEPARTMENT OF AGRICULTURE AND INDUSTRIES INTERNSHIP APPLICATION

Please complete and return to:
Scott Absher
Intern Program
1445 Federal Drive
Montgomery, Alabama 36107
Phone (334) 240-7100 Fax (334) 240-7190

Name: _____

Permanent Address: _____

Home Telephone: _____ **School or Cell Phone:** _____

Email: _____

Date of Birth: _____ **Social Security Number:** _____

Parents/ Guardian: _____

Daytime Phone: _____

College or University: _____

School Address: _____

Year in School: _____ **Junior** _____ **Senior** _____ **Grad** _____ **Law**

Major: _____ **Minor:** _____

GPA: _____ **Do you seek academic credit for this internship:** _____

Advisor's name and daytime phone: _____

INTERNSHIP REQUESTED: APPLICATION:

Possible dates* that I would like to serve: _____
*(*Most Internships are from 2 to 4 weeks)*

ACADEMIC INFORMATION: (Other Schools Attended & Date Attended)

Other: _____ **Dates (From: _____ To: _____)**

High School: _____ **Dates (From: _____ To: _____)**

Specific issue areas of interest to you:

Activities and Honors: _____

Skills applicable to Internship (typing, computer, research, etc.):

OCCUPATIONAL INFORMATION:

(Job or volunteer experience, beginning with most recent.)

Names and addresses of three references:

**** ALL INTERNSHIP OPPORTUNITIES ARE NON-PAID POSITIONS ****

If selected, I hereby agree to abide by the rules and regulations for Alabama Department of Agriculture and Industries employees.

Signature of Applicant _____ **Date** _____