

# Hope in the Harvest Internship Application



## Contact Information

Name	
Street Address	
City ST ZIP Code	
Phone	
Alt Phone	
E-Mail Address	

## Type of Internship

What length of internship are you interested in applying for?

- Exploratory Trip
- Short-term Internship
- Long-term Internship

Will this internship be for academic credit? Y/N

If YES, please complete the following information. If NO, then leave it blank.

Name of Academic Institution \_\_\_\_\_

Major: \_\_\_\_\_

Contact Person at University who is responsible for internship credit:

Name \_\_\_\_\_ Contact \_\_\_\_\_

## Area of Focus

Tell us in which areas you are interested in volunteering

- Farm Experience (Plant/Animal) be specific: \_\_\_\_\_
- Research Projects
- Classroom Instructor/Professor
- Extension Service
- Agricultural Economic Development
- Farming God's Way Ministry
- Communication

### Special Skills or Qualifications

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

### Previous Work Experience

Summarize your previous work experience.

### Previous Agriculture Experience

What is your background in the area of agriculture?

### Letter of Intent

What is your purpose in wanting to intern with Hope in the Harvest? What led you to this decision? What do you wish to accomplish and how is this related to your life's personal mission?

PLEASE ATTACH LETTER OF INTENT

### Statement of Faith/ Personal Testimony

How did you come to know Jesus Christ as your personal Savior and what impact has this had on your life and your faith?

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### Person to Notify in Case of Emergency

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

### References

Please submit names and contact information for at least 3 references. One of your references should be work-related and one of them should be from someone who is a leader within your community of faith or church.

Name	Position	Email	Phone

### 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 volunteering with us.

**\*\*Remember to submit a copy of your resume/CV with this application\*\***