

Betty Ford Alpine Garden
Internship Program Application

Name: _____ Date: _____
Mailing Address: _____

Please include the best way to contact you:
Telephone-Home: _____ Cell: _____ Work: _____
Email: _____

Do you have valid Driver's License? Yes No
Are you legally eligible for employment in this country? Yes No

How did you find out about this internship? _____

What is your specific interest in this field? _____

Please list all your Horticultural or Similar Experiences (educational, organizations, work, volunteer or personal) and dates: _____

What are your future horticultural goals? _____

Why do you want to be an intern at the Betty Ford Alpine Gardens?

Please mail or fax this completed application to: **Betty Ford Alpine Gardens**
183 Gore Creek Drive
Vail, CO 81657-4582
Attn: Garden Supervisor
Fax: 970-476-1685