

Tri-Vet Associates

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Farley IA 52046

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Internship Application Form

Please complete the following student intern resume, please note this form is only applicable to this program.

Please mail, fax or email the completed form.

PERSONAL INFORMATION:

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone : _____ Cellphone: _____
Email Address: _____

HIGH SCHOOL EDUCATION:

High School Name: _____
City: _____ State: _____ Zip Code: _____
Date of Diploma: _____

UNDERGRADUATE EDUCATION:

College Name: _____
City: _____ State: _____ Zip Code: _____
Major and Type of Degree: _____ Year: _____ GPA: _____

College Name: _____
City: _____ State: _____ Zip Code: _____
Major and Type of Degree: _____ Year: _____ GPA: _____

SCHOLASTIC HONORS:

Please list:

DATES AVAILABLE:

Please list the dates and times you would be available for your internship

WORK EXPERIENCE: (includes paid, volunteer and intern positions)

Job Title: _____

Employer's Name: _____

Starting and Ending Date: _____ Position Title: _____

Supervisor (Name & Title): _____

Job Title: _____

Employer's Name: _____

Starting and Ending Date: _____ Position Title: _____

Supervisor (Name & Title): _____

Job Title: _____

Employer's Name: _____

Starting and Ending Date: _____ Position Title: _____

Supervisor (Name & Title): _____

List additional Jobs on Separate Paper

REFERENCES:

Name: _____ Telephone Number: _____

Company/School: _____

Relationship: _____

Name: _____ Telephone Number: _____

Company/School: _____

Relationship: _____

Name: _____ Telephone Number: _____

Company/School: _____

Relationship: _____

Provide a brief paragraph describing why you feel an internship at Tri-Vet Associates, Inc would be beneficial to you.