

Nirmala's Farmstead Foundation Inc.
690 New Paltz Road
Highland, NY 12528
info@nirmalasfarmstead.org
www.nirmalasfarmsteadfoundation.org

Internship Application

Thank you for your interest in the Nirmala's Farmstead Foundation Internship Program. Intern play a vital role in the success of our mission.

All applicants will receive consideration for an internship, fellowship, or research assistantship without regard to race, color, sex, age, national origin, religion, disability, veteran status, sexual orientation, marital status, citizenship, or any other protected status.

All applicants must be 15-19 years old or young farmers age 20+ and must agree to the Nirmala's Farmstead Foundation Code of Conduct to apply.

All applications will be held securely and confidentially. Only authorized staff will have access to your information. All applicants must answer the following questions. Failure to answer honestly will disqualify the application from service as an intern with our organization.

To Apply:

Fill out the entire application and submit with a one page essay.

Essay question topics are at the end of the application, please write a one-page essay to submit with application.

General Information

Date:_____

LastName_____ First Name _____

Home address:

Age_____

Date of Birth ____/____/____

Current School Occupation:_____

Expected Graduation Year:_____

Major:_____

Academic Supervisor or Reference Contact
Information:_____

Date of last Tetanus booster: _____

List all Allergies:

Illnesses:_____

Please specify any other health concerns, physical activity restrictions, or other information you want the program directors to be aware of:_____

Internship at the Nirmala's Farmstead Foundation is a full time responsibility, we work outdoors most of the day in the heat, sun, rain and snow as we must keep a certain pace in order to get everything accomplished.

Are you willing to work in these conditions? Please circle one: Yes No

List Previous Internship and Work Experiences:

Date	Location	Work duties	Contact name and Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

What do you hope to get from this experience?

Is there anything not listed in the internship project description that you hope to experience?

Essay Question

(You can attached answers on One Page- attached to this application.)

- Why do you want to become an entrepreneur?
- Where do you see yourself in 5 years?
- Tell us about a challenge in your life and how you overcame the obstacles?
- If you could change one thing in the world today – What would that be and why?
- Tell us one thing about yourself, that we don't know about?
- What do you do for fun?

Parent or Guardian Information (If Under Age 18)

Parent/Guardian Full Name: _____

Primary Phone Number: _____

Cell Phone Number: _____

Primary Email Address: _____

Best time of the day to contact _____

Address _____

City/ State / Zip _____

Emergency Contact Information

Full Name: _____

Phone: _____

Work Phone: _____

Relation to applicant: _____

References:

List three person that can attest to your character, skills and experience.

	Name	Address	Telephone	Title/Relationship
1.				
2.				
3.				

Signature

By Signing below you agree that all information that you can have provided in this application is true to the best of your knowledge. All Students under the age of 18 must have parental and or guardian consent below.

Signature _____

Date _____

Parent and or Guardian Signature _____ Date _____

If under the age of 18: