



BERKSHIRE BOTANICAL GARDEN

## Internship Application

Date \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

College \_\_\_\_\_ Graduation Date \_\_\_\_\_

Major \_\_\_\_\_

**Educational experience in horticulture, public gardening, design:**

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**Other related educational experience:**

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**Work experience in horticulture, design, and education:**

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**What do you feel you can offer the Garden?**

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What would you like to gain from your experience at the Garden?

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The internship generally runs from mid-May through start of August. Please indicate if those dates work for you. If not please list the dates that would work for you:

From: \_\_\_\_\_ To: \_\_\_\_\_

Please list the names and telephone numbers of three references who are familiar with your horticultural or related experience:

1. Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
Your relationship to this person \_\_\_\_\_

2. Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
Your relationship to this person \_\_\_\_\_

3. Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone \_\_\_\_\_  
Your relationship to this person \_\_\_\_\_

Mail completed application to the following address:

**Berkshire Botanical Garden**  
**Attn: Dorthe Hviid, Director of Horticulture**  
**P.O. Box 826**  
**Stockbridge, MA 01262**

Questions call (413)-298-4505  
Email: [dhviid@berkshirebotanical.org](mailto:dhviid@berkshirebotanical.org)