



BERKSHIRE BOTANICAL GARDEN

## Internship Application

Name \_\_\_\_\_ Date \_\_\_\_\_

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

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

School \_\_\_\_\_ Graduation Date \_\_\_\_\_

**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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**List the approximate dates you wish to start and end your internship:**

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 the following address:

Berkshire Botanical Garden

Attn: Dorte Hviid, Director of Horticulture

P.O. Box 826

Stockbridge, MA 01262

Questions ? Call (413)-298-4505

email [dhviid@berkshirebotanical.org](mailto:dhviid@berkshirebotanical.org)