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*A Tradition of Leadership and Excellence in Equine Medicine*

**PRE-GRADUATE EQUINE WORKING STUDENT PROGRAM**  
 Spring Semester 2009

Name	
Current address	
Permanent address	
Telephone numbers	
E-mail address	
Date of birth	
Social security number	
Drivers license number*	
Proposed dates of internship	
Year in School	
Major	
Area of interest	
Experience with horses (Personal, scholastic, and/or work)	
Why are you interested in this internship?	

\*Please include copy of driver's license

**PRE-GRADUATE EQUINE WORKING STUDENT PROGRAM -  
APPLICATION**

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<p>What do you see as your goals for this internship?</p>	
<p>Are you fulfilling a curriculum prerequisite or is this a work experience to be used for future employment?</p>	
<p>Please indicate which internship you are interested in, in order of preference, by numbering 1, 2 or 3. Or simply indicate no preference.</p>	<p><input type="checkbox"/> Equine reproduction  <input type="checkbox"/> Ambulatory  <input type="checkbox"/> Hospital  <input type="checkbox"/> No preference</p> <p><b>If there are areas you are not interested in please do not list them.</b></p>
<p>Applicant's signature</p>	<p>_____</p> <p style="text-align: right;">Date</p>
<p>Comments by Course Director in support of application</p>	
<p>Certification by Course Director</p>	<p>_____</p> <p>Name</p> <p>_____</p> <p>Signature <span style="float: right;">Date</span></p>

**Please complete and return this form to Grace Tirado Perez, by October 31, 2008. Selections will be made by December 1, 2008.**

**Peterson & Smith Hospital is a drug free workplace.  
We carry out on-entry and random drug testing.**