Knox County Farm Bureau Foundation 2025 Internship

Application Due April 25, 2025 by 4:30PM

Data.			

PERSONAL IN	NFORMATION		
Applicant Name:	Birthdate:		
Home Address:	State: Zip:		
Phone Number: High School Name	:		
School Address:	State: Zip:		
School Phone Number: Graduating	GPA: High School Rank:		
COLLEGES	ATTENDED		
College:	College:		
Location:	Location:		
Dates:	Dates:		
Current College GPA:	Current College GPA:		
Expected Date of Graduation:	Expected Date of Graduation:		
Course of Study (major):	Course of Study (major):		
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COLLEGES EXPERIENCES					
Organizations & Activities (include offices held and responsibilities):					
Honors Received:					
Relevant Coursework:					
OTHER INFORMATION Civic, Church, High School Activities & Honors:					
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Work Experience (List most recent first):					
Hobbies:					
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Career Goals:	
Explain how this internship program will assist you in your caree	r development:
PLEASE INCLUDE A SEALED TRANSCRIPT OF YOUR UNIVERSITY AC	ADEMIC RECORD.
The following may be used in a press release to area media if yo	u are chosen as the intern.
Father's Name: Address: Mother's Name: Address:	
Mother's Name: Address:	
Number of Family Members: Number in College:	
I solemnly declare that the foregoing answers are true and corre	ct to the best of my knowledge and belief.
Date: Signature of Applicant:	
Email this form to: knowofh@knowofh org	

Email this form to: knoxcfb@knoxcfb.org

