

2026 Application Form for BCHC Interns

Name _____

Phone # _____ Email _____

Address _____

City _____ State _____ ZIP _____

1. Birthdate _____

2. Work Availability June thru Sept: Starting date _____ Ending date _____

3. Driver's license number _____ State _____ Type _____ A _____ C

4. Towing Experience

a. # yrs _____ Type rig _____

b. # yrs _____ Type rig _____

5. Education: C = completed P = partial

a. Level: _____ High School _____ Jr. Col _____ College _____ Post Grad

b. Major(s) _____

6. Work Experience

a. Dates Started _____ Ended _____

Employer _____

Job Duties _____

b. Dates Started _____ Ended _____

Employer _____

Job Duties _____

c. Dates Started _____ Ended _____

Employer _____

Job Duties _____

d. Dates Started _____ Ended _____

Employer _____

Job Duties _____

7. Outdoor Experience

Camping _____

Trails _____

Volunteering _____

Training & Certifications _____

8. Equestrian Experience

Riding _____

Teaching _____

Stock Care _____

Packing _____

9. Job Skills

Planning _____

Scheduling _____

Budgeting _____

Leadership _____

Other _____

10. Career Goals

Short Term _____

Long Term _____

11. Reference A (person who knows your work experience, work habits, character & skills)

Name _____ Relationship _____

Phone _____ Email _____

12. Reference B (person who knows your work experience, work habits, character & skills)

Name _____ Relationship _____

Phone _____ Email _____

13. I hereby attest that the above information is true, accurate and complete to the best of my knowledge.

DATE: _____ SIGNATURE: _____