



Yuma

2022 Natural Resource Career Development Program (NRCDDP), Summer Internship

Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Mobile / Cell Phone: _____ e-mail: _____
Male Female Non

Gender:

Yes No

Are you UA-Yuma enrolled student?

If no are you planning to be enrolled in Summer? Yes No

Major: _____

Yes No

Are you a citizen of the United States?

Emergency

Emergency Contact: _____ Cell Phone: _____

Relationship: _____

Disclaimer and Signature

If selected for 2022 USDA NRCS Summer Internship Program, I promise to follow the rules and regulations that exercise control over this program. I should take advantage of this educational program offered. If for any reason, the student violates rules and regulations the student may be subject to dismissal of the program. By signing: I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my release.

Signature: _____ Date: _____

Student Release Form

I, _____ who is enrolled with this agreement, am in excellent health, and may participate in strenuous physical activities associated with the program. I agree to defend, indemnify, and hold harmless USDA and the selected university, its officers, servants, agents, and/or employees, contractors, and insurers from any and all claims for injuries sustained during my participation in this program.

Permission is hereby granted to the USDA and the selected university to use pictures and video(s) of myself in any promotional materials.

Permission is granted in the agreement for myself to receive emergency medical treatment, if needed, and I certify there are no limits to my participation in the program activities, except as stated in writing and included with a supplemental medical history.

I understand and acknowledge that the program does not offer any medical insurance to protect against injuries, makes no claims to do so, and has no responsibility for any medical expenses incurred. I understand that each participant must assume the risk and any related financial responsibility that could result from participation in any of these activities. I agree to assume any risk and financial responsibility.

Signature: _____ Date: _____

Please Submit via E-Mail (bbrenes@email.arizona.edu):

1. Application
2. Resume
3. One-Page Essay "How do you see this summer internship benefiting you and your career goals, and why should you be selected."