

Southern Equine Service
1258 Banks Mill Road
Aiken, SC 29803
803-644-1544, fax 803-644-1599

Extern Application

Full Name (First, Middle, Last): _____

Externship Dates: _____

Would you like housing at the clinic or find your own housing? _____

Present Address:

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Permanent Address:

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

PreVeterinary Medical Education:

College(s) Attended	Dates	Degree
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Veterinary College:

Date of Graduation: _____

Are/were you a national AAEP student member? _____

Academic Honors/Clubs: _____

Previous Employment:

Company/Practice	Dates	Supervisor/Employer (Name and phone)
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References

Name:

Address:

Extra-Curricular Activities and Interests:

Publications, Research or Other Pertinent Experience:

Applicant Signature