

Potential Internship Site Questionnaire



American Horticultural Therapy Association®

In an effort to support the educational efforts of those pursuing their Professional Registration, we are attempting to put a comprehensive list together of possible internship sites. If you have a site or you would like to suggest a site for AHTA to investigate or have the ability to offer a facility/placement, could you take a few moments to answer the following questions?

1. Are you suggesting a site at which you are currently located? Yes No

2. If you are not "at" the site, but suggesting we investigate further, could you fill in the following contact information:

Name of Facility _____

Address _____

City _____ State _____ Zip _____

Contact Name _____

Contact Telephone _____

Contact E-mail _____

3. If you would like to suggest a site where you are currently working, please fill out the following:

Type of Facility _____

Name of Facility _____

Address _____

City _____ State _____ Zip _____

Contact Name _____

Contact Telephone _____

Contact E-mail _____

Is there an HTR/HTM on site? Yes No

Do you currently have an Internship program? Yes No

If you have a program or are interested in beginning one, what would be the optimal starting date (ie. Sept. 1, June 1, flexible, etc.)?

Date _____/_____/_____

Is there a pre-determined length of time for the internship or is it flexible? _____

What would be the optimal schedule for an intern (daily, twice weekly, etc.)? _____

Would there be any remuneration for the internship (payment, mileage, room/board, etc.)? Yes No

If so, please describe
