



University of Maryland College Park

Supplemental Internship Application Form 2017

| | |
|-------------------------------------|--|
| Name | |
| Address City, State, Zip | |
| Telephone Number | |
| E-mail Address | |
| Didactic Program | |

The \$40 application fee must accompany the supplemental application. Please make checks payable to University of Maryland.

Supplemental Application must be **received by February 15, 2017** to be considered.

Mail supplemental application with application fee to:

Phyllis McShane
Internship Director
Department of Nutrition and Food Science
University of Maryland
0112 Skinner Building
College Park, MD 20742