

Overton Veterinary Services LLC
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Veterinary Student Externship Program Application

*Complete .pdf form and email or fax to Overton Veterinary Services
To be eligible for the Veterinary Student Externship Program you must be enrolled in veterinary school.*

Date: _____

Name: _____
(First) (Middle) (Last)

Address: _____

City: _____ State/ZipCode: _____

Phone: _____ Cell Phone: _____

Email: _____

Vet School: _____

Address: _____

Advisor: _____ Advisor's Phone: _____

Please indicate date(s) you prefer for the externship. Check website for dates available.

Tell us a little bit about your background, major interests, areas of expertise:

We will contact you as soon as possible once we have received this completed application.