

## Internship Application

### Personal Information

First Name:  Last Name:

Address:  City:

State:  Zip Code:  Phone Number:

Email:

### Educational Background

Please Check One:     Full-time Student     Part-time Student     Graduate

School:  Expected/Previous Graduation Date:

How will this internship help with your future career goals?

### Internship Details

**Please check internships of interest to you**

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Animal Care                  | <input type="checkbox"/> Education   |
| <input type="checkbox"/> Marketing and Communications | <input type="checkbox"/> Restoration |

**Which internship is your first choice?**

**Internship Period:**     Short-Term (240 hours)     Long-Term (500 hours)

**Earliest Start Date:**

**Please indicate the days and times you are available:**

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday: