

Chahinkapa Zoo Association

PO Box 1325 Wahpeton, ND 58074 (701) 642-8709

Chahinkapa Zoo Intern Application

(Note: Interns must be enrolled in a college science curriculum.

Please include attachments if necessary)

PERSONAL INFORMATION	rs old or older	Date of Application:				
Name:						
Last	Last		First		Middle	
Address:						
Street	City		State	Zip		
Contact Information:						
Home		Mobile Em		Email	ail	
Position Desired:			Available	e Start Date:		
					ed: Yes No	
I am available for training: Daytime		Evening	_ Wee	Weekends		
I am available for working:	Daytime	Evening	_ Wee	kends		
EDUCATION						
	Name ar	nd Location	Graduat	ate?-Degree? Major/Subjects of Stu		
High School						
College or University						
Specialized Training, Trade School, etc						
Other Education						
PREVIOUS EMPLOYMENT						
Please list beginning from most recer	<u>ıt</u>					
Company:		Job Title:				
Address						
Street City		State		Zip	Zip	
Phone Number:		Ending Wage:			(Optional)	
Job Duties:						
Reason for Leaving:						

Company:			Job Title:			
	Street	City	State		Zip	
					(Option	ıal)
Job Duties:						
Reason for Leaving:						
Company:			Job Title:			
Address						
	Street	City	State		Zip	
					(Option	ıal)
			ve mentioned positi			
EMERGENCY INFORM	MATION					
Emergency Contact Na	nme:					
	First		Lasi	İ		
Emergency Contact Ad	Idress:Street		City	State		
			City	State	Zip	
Emergency Contact Ph	one Number:	Home	Mobile		Other	
DEEDENGES						
REFRENCES						
Name	Address Phor				ne Number	

^{*}Please include any additional information.