## Dakota Zoo Zookeeper Internship Program Application Form

Name: _(full name please, inclu	uding middle)		
Address:			
City:	Sta	te:	Zip:
Phone:	E-mail:		
Date of birth: (will only be used	d for background chec	k informati	on)
Emergency Contact (name and	phone number):		
Academic Institution:			
Instructor/Advisor/ Department			
Major:	Minor:	Y	ear Graduating:
Term Applying for:			
☐ Winter (January - April) <b>Deadline November 1</b> <sup>st</sup>			
☐ Summer (May - Augu	ust) <b>Deadline Marc</b>	ch 1 <sup>st</sup>	
☐ Fall (September - Dec	cember) Deadline Ju	ıly 1 <sup>st</sup>	
☐ Other. I am requestin <b>Deadline is 60 days bet</b>	•		_days.
I desire to begin my internship	on		
My last day of internship would	d be on		·
How did you hear about the Da	kota Zoo's keeper inte	ernship prog	gram?
I understand that a backgroun internship. I certify that the infalsification or misrepresentatifrom consideration for particip	nformation provided in it is i	s correct, a ontained he	nd understand that any erein will disqualify me
Applicant's Signature:		Da	te: