Internship/ Apprenticeship Application

Note: All answers must be printed or typed. Answers that are illegible or incomplete may preclude this application for consideration.

Applying for (circle one): Internship or Apprenticeship

Applicants must be responsible, mature, self-motivated individuals with dedication, a strong work ethic and stamina.

- Must be able to work independently and with others.
- Must display a willingness to follow directions and take responsibility for actions.
- Must be reliable, dependable, punctual and committed.
- Must show a commitment to God's creation.

Contact Information:				
Date:	Name:			
	Email:			
Address:				
City:	Stat	te:	Zip:	
<u>If you have lived at you</u>	ır current addres	s for less than 2	years, plea	se list previous address.
Previous Address:				
City:	Stat	te:	Zip:	
Home Phone:	Cell	Phone:		
Emergency Contact				
Name:				
Home Phone:	Wor	rk Phone:		
*If you are under the age of 18	years old and ap	plying for a job	, do you hav	ve a work permit? Yes or N
Skills & Interests				
Hobbies, Interests & Skills:				
,				
Current Occupation:				_
current occupation.				
Education Background:				
Previous Volunteer Experience:				
Previous Experience Working with	Animals & People:			
	Inte	rest Survey:		
	<u>c</u>	<u> </u>		
Please rate your interest in				
1 = Very Interested 2 = Some	ewhat Interested	3 = Not Intere	ested	
Cleaning Facility Edu	ıcation	_ Newsletter/Pub	lications	Other
Phone Assistance Fes Maintenance Pub	tival help	_ Fundraising		_Animal Care
Maintenance Pub 1Grant Writing Spe				_Guest experience

Which internships they are applying for:

(please circle your first choice and underline your second choice)

- Animal Care
- Animal Education
- Livestock & Agriculture
- Marketing & Public Relations

When are you available for an inte	1. 5			
	ernship?			
Will you be able to volunteer beforehand? If so when are you available? Wildlife Wonders does provide housing: Will you need housing: YES NO				
o please list the following information	n in case of an emergency:			
npany:	Name of Insured:			
licy #				
case of emergencies, do you have	ve any allergies or medical conditions that we should be aware of?			
re there any other physical or me	ental conditions that we need to be aware of?			
	e be specific)			
Ouring the past 7 years, have you	been convicted of a crime? Yes or No			
aring the past / years, have you	The controlled of a crime. Test of the			
yes, please describe in detail:				
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References:

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		Phone:	
Address: Relationship:		p:	
Name:		Phone:	
Address:		Relationshi	p:
Previous Employment:			
or job applications only. Beg	in with most	recent position.	
Company:		Address:	
ity:	State:	Zip:	Phone:
			_ Type of Business:
Dates of Employment Start:		End:	Ending Salary:
osition Held:			
eason for leaving:			
ompany:		Address:	
ity:	State:	Zip:	Phone:
upervisor's Name:			_ Type of Business:
lates of Employment Start:		End:	Ending Salary:
osition Held:			
eason for leaving:			
ity:	State:	Zip:	Phone:
			_ Type of Business:
lates of Employment Start		End:	Ending Salary:
ates of Employment Start.			
osition Held:			

Wildlife Wonders Release of Liability and Assumption of Risk

This document affects your legal rights, please read it carefully

l,	, am aware that whi	ile volunteering, interning, working at, or visiting Wildlife
•	ese activities with knowledge	sociated with being around the animals at WW. I am ge of the potential danger and risk involved, and hereby
that I WILL NOT sue, or othery contractors, volunteers, or ag death resulting from the negli	wise make any claim against ainst any land owner or less igence or other acts or omis	at, or visit the property and be around the animals, I agree t WW, its directors, officers, employees, agents, see whose property may be used, for injury, damage, or ssions, however caused, by any WW directors, officers, person as a result of my volunteering, working at, or
from any and all actions, clain	ns or demands for myself, m eering, working at, or visitin	ectors, officers, employees, agents, contractors, volunteer ny heirs or personal representatives, for injury, death or ng WW. The terms of this Release shall also be binding as
behind designated safety barr without express approval from	riers or in designated areas and will not attempt	me by any representative of WW. I agree to remain and will not attempt to approach an animal or cage to stick any item, including body parts, into a cage. I others in any type of jeopardy by handling or provoking ar
· · · · · · · · · · · · · · · · · · ·	•) or groups of persons if a representative of WW are exposing themselves, others, or the animals to risk of
I have carefully read this Agro	•	nd its contents. I am aware that this is a RELEASE OF
Name:	Address	::
City:	State:	Zip:
Dhana		
Signature:	1	Date:
If under the age of 21, a pare	nt or guardian must release	e Wildlife Wonders of liability from that minor
Signature:		
Printed Name		Date:

General Rules

- 1. No one is allowed to come on the property without permission from the directors. You must have an appointment time set up. If no one is around you must wait until someone shows up.
- 2. IF WE FIND VOLUNTEERS WANDERING AROUND OUR PROPERTY after hours, THEIR PRIVILEGES AS A VOLUNTEER WILL BE TERMINATED.
- 3. NEVER stick your fingers in a cage.
- 4. NEVER open ANY gate (compound, animal cage or farm animals) unless you have permission by a zookeeper.
- 5. Only go to designated and approved areas.
- 6. NEVER EVER feed an animal without the keeper's permission.
- 7. Do not enter buildings without permission.
- 8. Volunteers must be 16 years or older. (There are a few exceptions see director about younger volunteers.)
- 9. Attendance at volunteer meetings is mandatory. Meetings, though infrequent will be held in order to keep up with new procedures.
- 10. Any volunteer not meeting level requirements will be reduced to the level for which requirements are met.
- 11. Wildlife Wonders reserves the right to permanently excuse anyone from the volunteer program or from the center at any time if their conduct is deemed unbecoming for a person representing Wildlife Wonders.
- 12. No animal abuse of any kind will be tolerated.
- 13. No part of your person shall come within 3 feet of any cage that is not marked appropriately for your level.
- 14. No perfumes, colognes, or hairsprays shall be worn when at Wildlife Wonders.
- 15. Proper attire is necessary to eliminate scrapes and scratches.
- 16. No dangling jewelry, large shiny barrettes, pins, hair ties or large objects shall be worn.
- 17. No smoking shall be permitted on the premises due to the extreme fire hazards that go with living in the forest and hazards to the animals
- 18. No food or toys shall be offered to any animal without prior approval from management.
- 19. No alcohol or drugs shall be consumed prior to, or while working at Wildlife Wonders.
- 20. Any person believed to be impaired due to alcohol or drugs will be asked to leave the property for the day. We ask that all volunteers bring any infraction of this rule to management.
- 21. No running, horseplay or loud noises on the property. This is a sanctuary for the animals.
- 22. Please do not bring your domestic pets. The Wildlife Wonders animals can be susceptible to canine and feline diseases.
- 23. All litter shall be deposited in trash receptacles.
- 24. If you have been entrusted with enclosure codes or keys, DO NOT share these with anyone.
- When you complete a project, do not walk away until all of the tools, materials and debris have been put away or discarded.
- 26. If you don't know the answer to a question asked of you, please do not make one up. Tell the person that you will find out for them and then do so. Bad information is worse than none. Your words and actions are a reflection of our mission.
- 27. A professional attitude in working relationships between staff members should be maintained so as to enhance the operations of the center.
- 28. Proper attire must be worn in accordance with Wildlife Wonders dress code: On site: this includes but not limited to closed toed shoes and long pants at all times. Off site: closed toed or other approved footwear that is considered sturdy, professional and safe. Flip Flops are never approved, some sandals are okay. Please check with your employer to ensure you are wearing approved footwear.

I have read the above and understood all of these rules and procedures. I also understand that these rules are subject to amendments later on. I agree to abide and enforce these rules.

Signature:	Printed Name:		
	Date:_		<u> </u>
		If under 21 years of age:	
Parent or Guardians Signature:			Printed Name:
5	Date:_		