



Name _____ Submission Date _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____ Date of Birth _____

How did you hear about our internship? _____

For what specific dates are you applying? (the longer the period of availability the better)

Month _____ Day _____ Year _____ -Through- Month _____ Day _____ Year _____

(Other specific date requirements) _____

Do you require housing? YES NO

Will you have your own vehicle while you are here? (required) YES NO

MEDICAL INFORMATION

I have or will obtain a current tetanus shot (required)- within the past 5 years

YES NO

I have a current rabies vaccination (optional but preferred)- within the past 2 years

YES NO

I have or will obtain proof of a negative Tuberculosis test (required)- within the past 12 months

YES NO

I have or will obtain proof of being fully vaccinated and boosted against COVID-19 (required)

YES NO

Manufacturer _____ Date _____

Manufacturer _____ Date _____

Manufacturer _____ Date _____

Do you have a medical or psychiatric condition, allergies, or medications that you take that would prevent you from performing the duties outlined on our website in a safe and responsible manner?

YES NO *If yes, please explain:*

Do you have medical insurance YES NO Insurance company _____



Have you ever been convicted of a felony or misdemeanor crime? YES NO

(This does not apply if the conviction has been expunged, is contained in a sealed record, or was a juvenile conviction. A criminal conviction will not necessarily bar you from employment. We will consider the nature of the crime, the time, which has expired since its occurrence and any rehabilitation you have undergone) *If yes, please describe fully:*

REQUIRED ATTACHMENTS : Incomplete applications will not be considered:

1. Your resume (including education, relevant course work, training, certifications, extracurriculars and employment. Include brief descriptions of your work and any contact information.)
2. A cover letter describing yourself, why you would be a good fit, why you want to work here, and what your career and personal goals are. (This is a great opportunity to explain why you are the best person for the position)
3. Two *letters of reference* including addresses and contact numbers from two individuals not related to you who have known you for over a year. (preferably employers or volunteer position supervisors)
4. Two names and contact numbers for staff members at your school who know you.
5. Upon acceptance, you will be required to submit copies of your medical information on page 1.

APPLICANT ACKNOWLEDGEMENT

I certify that the information in this application is accurate, current and complete. I understand that misstatements or omissions may result in disqualification from further consideration.

I authorize Forest Animal Rescue to request, and I also authorize and request each former employer, school attended and each person, firm or corporation given as references above to furnish at any time, any information which may be sought concerning me and my work habits, character or skill, and any other data required, whether in connection with this application or for purposes of complying with surety company requirements or otherwise.

This application will not be considered without the applicant's signature.

Signature _____ Date _____