



10 Smith Lane, Eastham, Ma 02642-2671 • 508-240-2255
wild.care@verizon.net • wildcarecapecod.org

Application for Internship Program

Complete this application and mail to Internship Coordinator, 10 Smith Lane, Eastham MA 02642

Personal Information

Last Name: _____ First Name: _____

Season applying for (circle one):

Spring (Deadline Dec. 31) Summer (Deadline Feb. 1) Fall (Deadline July 1)

Mailing Address: _____

City: _____ State: _____ Zip: _____

Permanent Address _____

City: _____ State: _____ Zip: _____

Phone Number: _____ **Social Security #:** _____

Email: _____

Date of Birth: _____ (Must be over 18 years of age to apply)

Have you ever been convicted of a crime? (Circle one) YES NO

If yes, please explain the charges and circumstances: _____

Please include the following supporting documents:

1. A current resumé and cover letter
2. A copy of your academic transcript
3. Two academic or professional letters of reference
4. An essay between 150-300 words entitled, "What experience I hope to gain from an Internship at Wild Care"

Applications will be reviewed as they are received. Two telephone interviews will be scheduled after a signed internship agreement is received. If you are selected, proof of medical insurance and current tetanus immunization will be required prior to your starting date.

Educational Information

Name of school you currently attend or have recently graduated from: _____

School entry date: _____

Have you graduated from your degree program? Yes No

Anticipated graduation date: _____

Bachelors or Masters degree: _____

Major Field of Study: _____

Extra-curricular activities _____

Medical Information

Emergency Contact:

Relationship: _____

Name: _____

Address: _____

Phone(s): _____

(CIRCLE ONE)

Do you have a current tetanus shot: YES NO

Do you have current rabies vaccinations: YES NO

Do you have medical insurance? YES NO

Name of insurance provider: _____

Do you have any medical condition or allergies that require special accommodations? (circle one)

YES NO

If yes, please explain: _____

Additional Information

Do you have access to housing on Cape Cod? Yes No

If no, would you require a housing allowance? Yes No

How did you hear about this internship? _____

The above information is true and accurate to the best of my knowledge. I understand that falsification of information will be grounds for immediate dismissal.

Signature: _____ Date: _____

They will thank us simply by their presence



We use recycled paper.