

Carolina Wildlife Care Internship Application

Please include cover letter and copy of resume with application.

OFFICE ONLY:	
Rec'd ___/___/___	1st Call ___/___/___
Int ___/___/___	Offer ___/___/___
Date ___/___/___	Y N
WILDLIFE CARE ONLY: Tetanus: Y N	

Thank you for your interest in an internship at Carolina Wildlife Care! All internship positions at CWC are unpaid. Applicants must provide their own transportation and housing.

Once your application is received and reviewed, you will be contacted for a personal interview. During this internship you will have a glimpse into the different aspects of Carolina Wildlife Care (CWC). CWC internships provide invaluable, first-hand experience working in the field of wildlife conservation in a non-profit setting.

Name _____ Home Phone (____) _____

Address _____ Cell Phone (____) _____

City _____ State _____ Zip _____ E-mail _____

School Name _____ Est. Graduation Date _____

Major/Minor in School _____

Other Training or Education _____

Special Skills/Interests _____

Please check the appropriate internship for consideration at Carolina Wildlife Care

- _____ Wildlife Rehabilitation
- _____ Environmental Education
- _____ Business Administration
- _____ Marketing & Communications
- _____ Graphics Design

Describe your experience working with animals/people/children that will prepare you for the internship.

What characteristics will make you an asset to Carolina Wildlife Care?

How did you learn about Carolina Wildlife Care? _____

Will you be able to commit to the entire 160 or 240 hours requirement for the internship uninterrupted over an 8-12 week period?

____Yes ____No If no, please explain_____

Are you receiving academic credit for this internship? ____Yes ____No

If yes, is there paperwork CWC has to complete? ____Yes ____No

Please include contact information of the teacher or where your final evaluation can be mailed or emailed.

Write your name the way you want it to appear on your name tag (first and last name)

Please list three references, preferably a combination of work and/or school related references.

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Nature of Relationship (i.e. Employer, Professor, Family Friend) _____

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Nature of Relationship _____

Name _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Nature of Relationship _____

Please return this form to: Carolina Wildlife Care
5551 Bush River Road
Columbia, SC 29212
Attention: Executive Director