



APPLICATION FOR COLLEGE INTERNSHIP

The Aquarium of the Pacific in Long Beach is a strong believer in equal opportunity for all.
Please print and answer all questions completely.

GENERAL INFORMATION

Last Name _____ First Name _____ Middle Initial _____

Current Street Address _____ Apt. _____

City _____ State _____ Zip Code _____

Home Phone (_____) _____ - _____ Cell/Work Phone (_____) _____ - _____

Permanent Mailing Address _____ Apt. _____

City _____ State _____ Zip Code _____

Email Address _____

Area of interest for internship:

- | | |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> Education/Exhibit Interpretation | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Sales & Promotions | <input type="checkbox"/> Marketing/Communications |
| <input type="checkbox"/> Special Event Management | <input type="checkbox"/> Husbandry*: Aquarist _____ Marine Mammalogy _____ |
| <input type="checkbox"/> Human Resources/Volunteer Services | <input type="checkbox"/> Dive Safety _____ Aviculture _____ Program Animals _____ |
| <input type="checkbox"/> Vet Services* _____ | <input type="checkbox"/> Other _____ |

*Applicants must have a minimum of 2 years in college in biological sciences or 1 year in a RVT/CVT program, a Letter of Recommendation from a career advisor or professor, and a minimum GPA of 3.0 or higher.

*Husbandry applicants must meet the minimum age requirement of 18

(If you are applying for more than one position, label the first choice 1, the second choice 2, etc.)

How did you hear about us? _____

Time period you wish to perform an internship project: From ____/____/____ To ____/____/____

No. of hours/week _____ Morning _____ Afternoon _____ Weekdays _____ Weekends _____

Background Investigation Information

Please initial

_____ I hereby authorize the Aquarium of the Pacific to make an independent investigation of by background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for volunteering now and, if applicable, during the tenure of my volunteer service with the Aquarium.

_____ I release the Aquarium of the Pacific and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

_____ The following information is my true and complete legal name and all information is true and correct to the best of my knowledge.

_____ I understand that a background check is only conducted after an internship interview and prior to acceptance into a position.

Full Name _____

Maiden name or other names used _____

Former address _____ How Long? _____

City/State _____ Zip Code _____

Date of Birth* _____ Social Security Number ____ / ____ / ____

Drivers License Number _____ State Issued _____

*This information is required for identification purposes only, and is no manner used as qualifications for acceptances. The Aquarium of the Pacific is an Equal Opportunity Employer, and does not discriminate on the basis of Sex, Race, Religion, Age (40 and over), Handicap or National Origin.

U.S. Citizen: Yes No If you are not a U.S Citizen are you eligible to work or study in the United States? If so, please provide document type and number for verification purposes:

Type of Document _____ Document Number _____

Issuing Agency _____

Have you ever been convicted of a crime? Yes No

If yes, please explain (a conviction will not automatically bar selection for an internship) : _____

Are you a member of the Aquarium of the Pacific? Yes No

ACKNOWLEDGEMENT

The information in this application is true and complete, and I have not knowingly withheld any information. I understand that misrepresentation may be cause for dismissal. I authorize verification of all information contained in this application. I also understand that if I become an intern at the Aquarium of the Pacific, I will be expected to demonstrate a serious commitment to uphold the mission of the Aquarium; to maintain a culture of integrity for people, animals and the environment; and to focus on customer service, with respect for all employees and volunteers.

If I am selected to become an intern at the Aquarium of the Pacific, I agree to follow all Aquarium of the Pacific guidelines and policies. In addition, I consent to emergency medical attention in the event that I am unable to give my consent. I am aware that the Aquarium of the Pacific has the right to release me from the internship at any time, just as I have the right to withdraw at any time.

Please submit your **Completed Application, Cover Letter(s) and, Resume to:**
Vet Services applicant: Attach college transcripts & Letter of Recommendation
Dive Safety applicant: Attach photocopy of highest certification card

Aquarium of the Pacific
Attn: Shannon Penna, Volunteer Coordinator
100 Aquarium Way
Long Beach, CA 90802

Signature _____ Date _____

Thank you so much for your interest in The Aquarium of the Pacific.

OUR MISSION

*To instill a sense of wonder, respect and stewardship
for the Pacific Ocean, its inhabitants and ecosystems.*

*... by involving the community and the region
in engaging, entertaining, educational, and
empowering exhibits and programs
on the Pacific Ocean and the lives of its people.*