

Capron Park Zoo

Internship Application

201 County Street
Attleboro, MA 02703
508-222-6202 • 508-223-2208

Name: _____ Age: _____ DOB: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Name of School: _____

Years completed: 1 2 3 4

Major: _____ Minor: _____

Degree/Diploma to be awarded: _____

Anticipated Graduation Date: _____

Supervising teacher/advisor: _____

Additional Skills: _____

Current or past zoo/animal experience: _____

Organizations you belong to: _____

Where did you hear about the intern program at Capron Park Zoo? _____

Why are you interested in this internship? _____

What do you hope to gain from this experience? _____

Date Available: _____

Signature: _____ Date: _____