

**Little Rock Zoo
Summer Animal Care
Internship Application**



Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

University: _____ Major: _____

Current School year (please circle): sophomore junior senior graduate

References: (at least one must be education; either professor or advisor)

Name: _____ Phone: _____

Relationship: _____ E-Mail: _____

Name: _____ Phone: _____

Relationship: _____ E-Mail: _____

Please rank areas according to interest (1 being the highest). List no more than 3 areas.
Please Do Not list any areas you are not willing to interview for and possibly accept.

___ AR Heritage Farm

___ Great Apes

___ Hoofstock and Birds

___ Primates

___ Carnivores

___ Ambassador Animals

Will you be receiving college credit for this internship, yes or no? ____.

(If yes, arrangements must be completed before start of internship)

Signature _____ Date _____