



Volunteer Services Internship Application

WildCare 76 Albert Park Lane San Rafael, CA 94901
415-456-SAVE (tel) 415-456-0594 (fax)
wildcarebayarea.org

Personal Information

Full Name: _____

Full Mailing Address: _____

Email: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Date of Birth: _____

For Student Applicants

School Attending: _____

Supervisor Contact: _____

Supervisor Phone: _____

Supervisor Email: _____

Current year in school: _____

Major/Minor: _____

For Non-Student Applicants

Highest Degree or Diploma Received & Year: _____

All Applicants

1. Please provide a brief employment history. Include employer, dates, your position, and responsibilities:

2. Describe any volunteer coordination, computer skills, , event planning and facilitation, or community outreach related training and/or experience that you have:

3. Why do you want to do an internship at WildCare? What interests you about this agency?

4. What do you expect to get out of this internship? List at least 3 goals that you'd like to accomplish during your term at WildCare:

5. This is a time consuming but valuable internship. Please explain any physical or other limitations that might hinder you from participation in some events or successful completion of the internship requirements (such as back injury, child care needs, etc.).

6. Please list 2 professional references that you have known for 1 year or longer.

Primary Reference's Name: _____

Relationship: _____

Years known: _____

Phone: _____

Email: _____

Secondary Reference's Name: _____

Relationship: _____

Years known: _____

Phone: _____

Email: _____

7. Please indicate the term that you are applying for:

___ March to September ___ August to January ___ November to April

8. Please specify any time conflicts and their exact dates and reasons you foresee with the term you circled above.

9. Please specify the weekly schedule you think you could commit to in order to fulfill your 8-16 hours/week time commitment. (*Note that WildCare is open 9am-5pm every day of the week.*)

Sunday	_____
Monday	_____
Tuesday	_____
Wednesday	_____
Thursday	_____
Friday	_____
Saturday	_____

Thank you for your interest in WildCare! Please email volunteer@wildcarebayarea.org or call (415) 453-1000 x 21 with any questions. Only full entries will be considered. Please submit this application in one of the following ways:

- Fax hard copy submissions to (415) 456-0594 ATTENTION: Jessica Grace-Gallagher.
- Mail hard copy submissions to
WildCare: ATTENTION Jessica Grace-Gallagher
76 Albert Park Lane
San Rafael, CA 94901