



# Application for Internship

717 General Booth Boulevard

Virginia Beach, VA 23451

Phone: 757.385.0274

Fax: 757.385.0228

Email: [interns@virginiaaquarium.com](mailto:interns@virginiaaquarium.com)

### Please Attach the Following to Your Application:

- A cover letter detailing your expectations and how you plan to use your experience to assist your career and/or academic goals
- A resume and copy of your college/university transcript(s).
- Two letters of recommendation; one must be an academic reference.

Date: \_\_\_\_\_

### Personal Information

Answer the following questions. For those that do not apply, enter n/a.

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Title  Mr.  Mrs.  Miss  Ms. Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Shirt Size \_\_\_\_\_

Nickname \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Permanent Address (if different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Best time to reach you? \_\_\_\_\_

### Area of Interest

Intern Position \_\_\_\_\_

For which semester are you applying? \_\_\_\_\_ For which year are you applying? \_\_\_\_\_

Are you earning college credit through this internship?  Yes  No

### Education

School Name \_\_\_\_\_

Classification \_\_\_\_\_ Expected Graduation Date: \_\_\_\_/\_\_\_\_

Major/Concentration \_\_\_\_\_ Minor \_\_\_\_\_

Check the highest level of education completed:

High School

College 1 2 3 4

Graduate 1 2 3 4

List degrees earned \_\_\_\_\_

**Additional Information**

Describe any previous volunteer and/or intern experience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Share any special skills, interests and occupational background. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did learn of this internship? \_\_\_\_\_

---

---

**Emergency Contact**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ ( Home  Cell  Work) Relation \_\_\_\_\_

---

---

**Applicant Signature**

I affirm that the information given in my application is true and accurate to the best of my knowledge and I do not object to a background search.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Applicant

**The Next Step** *Return your completed intern application packet to Attn: Volunteer Resources Office – Intern Applicant. All application packets are reviewed and if selected for further consideration, you will be contacted for an interview.*