



Intern Application

Date: _____

Personal Information:

First Name:	Last Name:
Date of Birth:	Age at time of Application:
Address:	City
State:	Zip: County:
Home Phone:	Cell Phone:
E-mail Address:	
Preferred method of communication? Phone, E-mail, social media, no preference	
Intern Type: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter	

Health Information:

Emergency Contact Name:	Relationship:
Home Phone:	Cell Phone:
Do you have any conditions, such as allergies, physical disabilities, or medical conditions that would require special placement? If so, please specify:	
List of medications you are taking that we should be aware of in case of emergency:	
Can you lift 50 pounds? Y N	
Any injuries we need to be aware of?	
T-shirt Size (circle one): S M L XL 2XL	
Would you like to purchase an additional T-shirt or sweat shirt?	
<input type="checkbox"/> T-Shirt <input type="checkbox"/> Sweatshirt	



Work Experience:

Are you currently employed? Y N	
If yes, where do you work and what is your job title and description?	
Employer:	Job Title:
Short Description:	
Employer's Name and Phone Number:	

Education/Skills:

What is your level of education?	
None	2 year Associates
Home School	4 Year Bachelor's
High School/ GED	Master's Degree
Some College	Doctoral Degree
Are you currently enrolled in a college or university? Y N	
(to be considered an intern, you must be receiving credit for internship work with AMCS)	
If yes, where do you attend and when is your expected graduation date?	
University:	Degree:
Expected Date of Graduation:	
Do you have any requirements to fulfill for your school (i.e. internship, independent study etc.)?	

Circle any skills you have: Animal care accounting grant writing database management
 Carpentry plumbing fundraising GIS Microsoft office marketing
 IT education photography videography/video editing data analysis

Volunteer/internship Experience:

Do you have any volunteer/internship experience? Y N		
Organization Name:	Start Date:	until:
Please elaborate on skills and duties:		

Interest Survey:

Why are you interested in volunteering with Atlantic Marine Conservation Society?
What do you hope to gain from this experience?



What do you feel you can contribute to our organization?				
How did you hear about our internship program?				
What areas are you interested in helping with?				
Research	Fundraising	Response	Education	Administration
Stranding Investigations	Specially Trained Animal Response Team		Marketing	

What is Expected of All Interns and Volunteers:

- Interns must receive credit from their college or university for their internship work with AMCS
- Attend one beach cleanup and training per month
- Successful completion of Volunteer Orientation
- Compliance with the policies and procedures
- Behave in a professional and courteous manner at all times, avoiding conversation topics that might isolate, discriminate against or make other individuals feel uncomfortable
- Proper uniform attire worn at all times while volunteering
- Must commit to a volunteer schedule but be flexible in specific volunteer assignments
- Ability to work independently and as a team under potentially stressful conditions

Intern Benefits:

- Opportunity to participate in challenging and rewarding life experiences which offer personal enrichment
- Training materials and unlimited learning opportunities offering the ability to acquire new skills and knowledge

I fully understand that I am responsible for meeting the criteria listed above in order to remain an intern with the Atlantic Marine Conservation Society. I also acknowledge that I will be entitled only to the above benefits as a reward for my active intern status. I do not expect any monetary compensation for the services I am providing and authorize Atlantic Marine Conservation Society to use, display, and/or publish any photographs/videos of myself while interning.

Signature: _____

Print Name: _____

Date _____



Intern Program

(Liability form for interns 18 years of age and older)

I, _____ (name of intern), being of legal age, do acknowledge and agree as follows:

I intend to participate from the date hereof, and as an unpaid intern, in any and all of the activities of Atlantic Marine Conservation Society (hereafter referred to as "AMCS").

I acknowledge that I voluntarily undertake to participate in such activities knowing that such activities contain risks of harm, injury, and/or loss to me and which risks of harm, injury, or loss are solely my responsibility.

I further acknowledge that my participating in the activities of AMCS, and/or the New York State Marine Mammal and Sea Turtle Stranding Program, and/or the dive activities, may subject me to the hazards inherent in those activities (which have been fully explained to me by a qualified individual or designate of AMCS), in addition to unforeseen hazards which may arise in the course of such participation.

I assume the sole risk of any injuries, harm, or loss, which I may suffer or incur, by any cause or reason which participation in, or resulting from my participation in, any activities of AMCS. I hereby release and discharge on behalf of myself, my successors and assigns, AMCS, its officers, employees, agents, successors and assigns, from any and all claims or actions of any kind in law, admiralty or equity, for injury, harm, or loss, that I may suffer or incur while engaged in such activities, or which may result from having engaged in such activities, regardless of how such injury, harm, or loss may arise.

Signature: _____

Print Name: _____

Date _____

Witness _____

Date _____



**ATLANTIC MARINE
CONSERVATION SOCIETY**

Promoting Marine Conservation Through Action