

**Bear Educator Intern Application Form**  
**North American Bear Center, Ely Minnesota**  
**www.bear.org**

To apply for this internship submit the following:

1. Completed Application form
2. Professional resume
3. Copy of your school transcript, with GPA
4. Three references letters (non-family)
5. One recommendation from an instructor or professor
6. Indicate below (X) which internship you are applying for (Summer or Fall)

**Summer Internship:**                      **Mid. May 2017 to Aug 7, 2017**  
**Applications due Feb 10, 2017 or until filled (6 positions)**  
**(Some flexibility with dates due to school schedule)**

**Fall Internship:**                              **Aug 1, 2017 to Oct 24, 2017**  
**Applications due May 1, 2017 or until filled (2 positions)**  
**(Some flexibility with dates due to school schedule)**

**Submit all documents:**

Email to:                      JudyThon@bear.org

Or mail to:                      Judy Thon  
Director of Education, NABC  
13215 Downey Trail  
Apple Valley, MN 55124-5249 USA

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**PLEASE TYPE OR PRINT CLEARLY**

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ D.O.B. \_\_\_\_\_

Other contact information if needed: \_\_\_\_\_

Dates you are available \_\_\_\_\_

Are you willing to work 5 days a week, 7 hours each day? \_\_\_\_\_

Working weekends is expected. Is that acceptable? \_\_\_\_\_

## EDUCATION

**Do you have a High School Diploma or GED?**      **No**      **Yes**

If yes, name and location of high school or GED institute and year completed: \_\_\_\_\_

### **Undergraduate Colleges or Universities**

1) Name and location of school: \_\_\_\_\_

Dates attended in months and years: \_\_\_\_\_

Date Graduated: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Type of Diploma or Degree: \_\_\_\_\_ Major/Minor Fields of Study: \_\_\_\_\_

2) Name and location of school: \_\_\_\_\_

Dates attended in months and years: \_\_\_\_\_

Date Graduated: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Type of Diploma or Degree: \_\_\_\_\_ Major/Minor Fields of Study: \_\_\_\_\_

### **Graduate Schools:**

Name and location of school: \_\_\_\_\_

Dates attended in months and years: \_\_\_\_\_

Date Graduated: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Type of Diploma or Degree: \_\_\_\_\_ Major/Minor Fields of Study \_\_\_\_\_

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### **WORK HISTORY: (paid position)**

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

1. Include all employment. Begin with your current or last position and work back to your first. Employment history should include each position held, even those with the same employer.
2. Addresses must be a complete mailing address.
3. Answer all questions and completely summarize your experience including technical and managerial responsibilities and any special training, skills and qualifications for each position you have held.

***If you need additional space to adequately describe your employment history, you may attach a typed employment history providing the same information in the same format as this application form.***

What is your current employment status:      Full-Time              Part-Time              Unemployed  
   Retired              Student

1) Position Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

                                 Full-Time              Part-Time              Summer              Temp/Project

Average number of hours worked if part-time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you have used in the performance of this job.

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2) Position Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

                                 Full-Time              Part-Time              Summer              Temp/Project

Average number of hours worked if part-time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you have used in the performance of this job.

.....

3) Position Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

Full-Time          Part-Time          Summer          Temp/Project

Average number of hours worked if part-time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you have used in the performance of this job.

.....

4) Position Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employer's telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

Full-Time          Part-Time          Summer          Temp/Project

Average number of hours worked if part-time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you have used in the performance of this job.



**VOLUNTEER OR INTERNSHIP EXPERIENCE:**

1) Position: \_\_\_\_\_ Organization: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

Full-Time          Part-Time          Summer          Temp/Project

Average number of hours volunteered if part time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you used in this volunteer position.

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2) Position: \_\_\_\_\_ Organization: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Immediate Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor's Telephone Number: \_\_\_\_\_

Full-Time          Part-Time          Summer          Temp/Project

Average number of hours volunteered if part time: \_\_\_\_\_

Starting Date, Month and Year: \_\_\_\_\_ Ending Date, Month and Year: \_\_\_\_\_

Specific Reason for Leaving: \_\_\_\_\_

Summary of experience including special training/skills/qualification you used in this volunteer position.

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**Please tell us about any special skills (i.e. writing, photography, drawing, painting, computers, etc.)**

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**What prompted you to apply for this internship?**

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**How do you think this internship will contribute to your future education and career?**

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**Is there anything else you would like to tell us to support your candidacy?**

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**Agreement**

I declare that the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.

**APPLICATIONS DUE FEB 10, 2017 or until filled for SUMMER Internship**

**APPLICATIONS DUE MAY 1, 2017 or until filled for FALL Internship**

Signature \_\_\_\_\_ Date \_\_\_\_\_

2017 JT

**CLICK TO PRINT  
THIS APPLICATION**