



Isle of Wight Zoo Work Experience Application Form

The following information that you provide will be treated in the strictest confidence

Thank you for your interest in work experience at The Isle of Wight Zoo. The closing date for receiving applications for 2019 placements is **31st October 2018**. Applications will be reviewed in November, and shortlisted applicants will be contacted by **30th November 2018**.

If you do not hear from us by this date you have unfortunately been unsuccessful on this occasion.

PROSPECTIVE DATES OF PLACEMENT

Please provide the dates you wish to come to the zoo. The placement must be between 2 and 3 weeks long and fall completely within one calendar month between February and September inclusive. We have one placement available per month.

1st CHOICE Month : Dates :

2nd CHOICE (OPTIONAL) Month : Dates :

PERSONAL

(Please complete this section in BLOCK CAPITALS)

Surname:		First Name(s):	
Address:			
	Postcode:		
Tel No:		Mobile No:	
Date of Birth:		Email:	
Medical History: (Could you please detail any medical history that you would like us to know about whilst undertaking your work experience here at the zoo)			

To participate in Work Experience at the Isle of Wight Zoo you must meet all of the following criteria. Please tick to confirm you meet each one.

- I will be 18 or over at the time of my placement
- I am seriously considering a career in the field of zoology, zoo-keeping or animal husbandry
- I am able to meet my own expenses and understand that the Isle of Wight Zoo does not offer financial assistance
- I am enrolled in a biological or animal-related course

Course Title :

Qualification (i.e. BSc, NVQ) : Institution :

How will work experience at the Isle of Wight Zoo help you with your studies or career plans?

Are you interested in any particular species and why?

Are you a member of any special interest groups e.g. WWF, local rescue organisations etc?

EDUCATION

College / University	From	To	Qualifications you have achieved/will shortly achieve
Further Formal Training	From	To	Diploma/Qualification
Work Experience/Job Related Training	Date	To	Duties Performance/Subject

Do you have any other skills you have that you would like us to know about?

EMPLOYMENT DETAILS:

Please give details of your current and past employment starting with the most recent first:

Name & Address of Employer:	From & To Dates:	Position held/Main duties	Reason for leaving

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PLEASE NOTE: We have no on-site accommodation and are not in a position to recommend any establishments on the Isle of Wight. For information on accommodation, please visit the Island website www.iwight.com . Financial assistance is also not available to work experience students. All travel, subsistence and accommodation expenses must be born by the student.

REFERENCES:

Please give the names, email addresses and, if possible, a contact telephone number of two people who are willing to provide you with references (*one of which should be your present or most recent employer or course tutor*).

Reference 1:	Reference 2:

Declaration: To the best of my knowledge, the information given on this form is correct.

Signed: Date:

Please return this form to the following address:

**Work Experience
Isle of Wight Zoo
Yaverland Seafront
Sandown
Isle of Wight
PO36 8QB**