



# Student Application

**Applications due November 5, 2021 by 5:00 p.m.**

**Complete and Mail To:**

High School Intern Program, South Carolina Aquarium,  
100 Aquarium Wharf, Charleston, SC 29401

Name: \_\_\_\_\_ Gender: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ GPA: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Cell Phone # \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Name of High School: \_\_\_\_\_  
 Name of Parent or Guardian: \_\_\_\_\_  
 Cell Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

- Do you qualify for the “free lunch” or “reduced lunch” program at your school? Your answer will be kept confidential. \_\_\_ Yes \_\_\_ No
- Can you legally work in the United States? \_\_\_ Yes \_\_\_ No
- Can you get transportation to and from the Aquarium? \_\_\_ Yes \_\_\_ No
- Can you provide your own lunch during the training classes? \_\_\_ Yes \_\_\_ No
- Do you have any allergies or medical conditions? \_\_\_ Yes \_\_\_ No  
 If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_
- Do you take any prescription medications? \_\_\_ Yes \_\_\_ No  
 If yes, what are they and how often do you have to take them: \_\_\_\_\_  
 \_\_\_\_\_

**Emergency contact in case parent/guardian cannot be reached:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Work Phone#: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Home Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Please answer these questions. Attach another sheet if necessary.

1. Why do you want to be an intern at the South Carolina Aquarium?
2. What STEM-related (Science, Technology, Engineering and Math) or education-related career would you be interested in pursuing in the future and why?
3. What can you do to help the environment?
4. Since many people apply for this program every year, what (if anything) are some experiences that would set you apart from other applicants?

The information on this application is accurate to the best of my knowledge.

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

***\*Use another sheet of paper if needed\****