

DATA COLLECTION & ENTRY ASSISTANT APPLICATION

Date:

Name:

Current Mailing Address:      Until When?

Current Phone:       Fax:       E-mail:

Permanent Mailing Address:

Permanent Phone:       Fax:       E-mail:

Institution/University:

Degree Program:       Year:       Major:

Will you receive credit for your participation?

What requirement will this fulfill?

List memberships in organizations, appointed or elected offices, honors and scholarships received during and since college.

List current interests including vocational activities, hobbies, and cultural pursuits.

List technical skills, computer programs, statistical software packages with which you have experience. (Ex. Word, Excel, GIS…)

**EDUCATION\*:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **School** | **Name & Address** | **Dates Attended** | **Number of Years Completed** | **Did You Graduate?** |
| High School |  |  |  |  |
| College |  |  |  |  |
| College |  |  |  |  |
| Graduate School |  |  |  |  |

**\*All research volunteer applicants must send a current transcript in addition to all other application materials. Date transcript was requested:**

**EMPLOYMENT:**

|  |  |  |
| --- | --- | --- |
| **Date** | Type of Work Responsibilities | **Employer** |
| From:      To:       |  |  |
| From:      To:       |  |  |
| From:      To:       |  |  |

**LETTERS OF RECOMMENDATION:**

Two recommendation forms must be received before your application will be processed. If possible, please submit one employer and one academician. Please give names, complete addresses, and relationships of persons who will complete your forms.

1.

2.

**Availability:**

All applicants must be available for a period of no less than 3 months.

Time frame that you will be available to participate in data collection:

Start date:       Stop date:

Availability (circle): SUN MON TUE WED THU FRI SAT Mornings Afternoons

Other (describe):

Previous research experience in a zoo or with a managed collection: Yes [ ]  No [ ]

If yes, explain:

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

I hereby certify that I have not withheld any information and the above statements are correct and complete.

Signature:

Date:

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**For your application to be complete, please submit: (1)** Application, (2) Current resume or curriculum vitae, (3) Current transcripts, (4) Essay, and (5) Two recommendation forms.

**Return to:** Austin Leeds, Graduate Research Associate, Cleveland Metroparks Zoo, 3900 Wildlife Way, Cleveland, OH, 44109, cal@clevelandmetroparks.com

Applicant Name:

**Cleveland Metroparks Zoo**

### DATA COLLECTION & ENTRY ASSISTANT APPLICATION - ESSAY

### YOUR INTERESTS, ABILITIES, CAREER, AND THE ZOO

Please type an essay (approximately 500 words) that includes the following points:

1. Why you seek this volunteer opportunity?
2. The strengths you bring as a research volunteer.
3. How this research volunteering opportunity relates to your career goals?
4. How may Cleveland Metroparks Zoo benefit from your participation in this program?

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#### CONFIDENTIAL RECOMMENDATION

Name of Applicant (last, first):

The above named person is applying for a position as a student research volunteer at Cleveland Metroparks Zoo in Cleveland, Ohio. Please comment on the intelligence, motivation, diligence, and other personal or professional qualities which would add or detract from the applicant’s success as a volunteer in this program.

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**CONFIDENTIAL STUDENT EVALUATION**

SUMMARY EVALUATION: Using the chart below, please rate the applicant in comparison to other individuals whom you have known in a similar capacity.

1. Superior
2. Exceeds Expectations
3. Satisfactory
4. Needs Improvement
5. No Basis for Judgment

|  |  |  |
| --- | --- | --- |
| **Characteristic** | **Rating (1-5)** | **Comments** |
| Potential |  |  |
| Motivation |  |  |
| Judgment |  |  |
| Oral Communication Skills |  |  |
| Written Communication Skills |  |  |
| Initiative |  |  |
| Interpersonal Skills |  |  |
| Adaptability |  |  |
| Integrity |  |  |

1. How long have you known the applicant?
2. In what capacity have you known the applicant?
3. Please check the box that applies:

|  |  |
| --- | --- |
| I strongly recommend this applicant |  |
| I recommend this applicant |  |
| I hesitate to recommend this applicant |  |
| I do not recommend this applicant |  |

NAME:

INSTITUTION/POSITION:

SIGNATURE/DATE:

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