## **Application Form – Summer Camp Assistant 2023**

Name:	e: Date of Birth (MM/DD/YY):	
Address:		
Telephone: (please provide 2)		
Name of school attending:		
Are you a Bermudian? YES No	0	
Please indicate the weeks for which you are	e requesting employment:	
☐ Week	1 3 <sup>rd</sup> July – 7 <sup>th</sup> July	
<del>-</del>	2 10 <sup>th</sup> July – 14 <sup>th</sup> July	
	3 17 <sup>th</sup> July – 21 <sup>st</sup> July	
☐ Week	•	
☐ Week		
_ ☐ Week		
_ ☐ Week		
_ ☐ Week		
If you have already been an Aqua Camp as	sistant, you may omit the next 3 questions.	
Why are you interested in participating in A	qua Camp?	
Soionea/Social Studios courses taken at co	haal	
Science/Social Studies courses taken at sc	hool:	
Previous experience of teaching or working	with children:	
Health Information (allergies etc.):		
Please provide contact details of two people	e we may call for references regarding character and work	
experience:	o we may can for references regarding character and work	
Name:	Name:	
Position:		
Telephone:	Telenhone:	

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Please check the following if you have:	
<ul> <li>□ Participated in the BZS Junior Volunteer Programme</li> <li>□ Attended Lecture Series (one or more)</li> <li>□ Participated in BAMZ/BZS Internship Programme</li> <li>□ Worked/volunteered at BUEI</li> <li>□ Worked/volunteered at the BIOS</li> <li>□ Participated in Aqua Camp as a child</li> </ul>	Dates: Dates: Dates:
Do you have a preference for the age group you teach? YES	NO
If yes, please circle which age group(s) you would prefer to teach P2); <b>Fun</b> (completed P3 or P4); <b>Zoo</b> (completed P5 or P6); <b>Exp</b> (both primary and middle school aged); <b>Conservationist</b> (Midd	olorers (completed M1 or M2); Freediving
Are you a strong swimmer and snorkeler? YES NO	
SCUBA qualification(s)? YES NO	
Details:	
Life-saving? YES NO	
Details:	Date:
First Aid Certification? YES NO  Details:	Date:
Dotailo.	
SCARS Training? YES NO  Details:	Date:
Signature:	Date:

Please return this form to:

Education Officer, Bermuda Zoological Society, P.O. Box FL 145, Flatts FL BX

Telephone: 293-2727 ext. 2142 – email: edofficer@bzs.bm