

Dolphin Quest Bermuda - Internship Application

Please fill in the following information and rename the file with your full name when saving this document:

Full Name	
Street Address	
City	
State	
Zip Code/Country Code	
Country	
Citizenship	
Cell Phone Number	
Email	

University	
Major	
Graduation Date or Expected Graduation Date	

Describe specialized training or certifications (CPR/First Aid), apprenticeships, skills (swimming) and/or extracurricular activities, involvement in organizations (IMATA, AZA) that are relevant.

Session Preference (please check):

<input type="checkbox"/>	2026 Session #4: 2026 November 23 – 2027 February 12
<input type="checkbox"/>	2027 Session #1: March 8 – May 28
<input type="checkbox"/>	2027 Session #2: May 31 – August 20
<input type="checkbox"/>	2027 Session #3: August 30 – November 19

Internship Program Preference (please check):

<input type="checkbox"/>	Marine Mammal Training Internship Level 1
<input type="checkbox"/>	Marine Mammal Training Internship Level 2
<input type="checkbox"/>	Marine Conservation Education Internship (available for Session 2 only)

I have noted the beginning and ending dates of this program, have checked my college schedule, and understand that I am committing to complete the entire program. I further understand that not completing the commitment will result in an incomplete for the internship.

Please type your initials here _____

Reference Name	Phone Number	Email



DOLPHIN QUEST

Bermuda

How did you hear about our internship program? Please check all that apply.

<input type="checkbox"/>	Internet search (Google, Bing, etc.)	<input type="checkbox"/>	IMATA – web site or at conference
<input type="checkbox"/>	Participation at Dolphin Quest	<input type="checkbox"/>	Other organizations (like IMATA)
<input type="checkbox"/>	Word of mouth	<input type="checkbox"/>	Other (please list details below)
<input type="checkbox"/>		<input type="checkbox"/>	