

Cat Tales - Zoological Training Center
Application for Admission
17020 N Newport Hwy, Mead, WA, 99021

Personal Information:

Name (last) _____ (first) _____ (middle) _____
Address _____ City _____
State or Province _____ Country _____ Zip or Postal Code _____
Daytime phone (_____) _____ Evening phone (_____) _____
Email address _____
Social Security Number _____
Birth date _____ Sex: Male _____ Female _____
Marital Status _____
In case of emergency, please contact: _____ phone (_____) _____
Do you suffer from allergies ? Yes _____ No _____
If yes, please explain _____

Height _____ Weight _____ Hair Color _____ Eyes _____ Blood Type _____

Physical Limitations:

Zookeeping is a very physically challenging profession which requires good physical health and keen senses.

Please list any physical limitations which may impose a difficulty in carrying out this type of training:

Identification:

Driver's License Number _____
Issuing State or Province _____ Issuing Country _____

Have you ever been arrested for, charged and/or convicted of any crime involving animal abuse?

Yes _____ No _____ If yes, please explain _____

Education:

Last High School Attended:
Name _____ Location _____ Graduation Date/G.E.D. _____

Last College Attended:
Name _____ Location _____ Proposed Major _____
Highest year completed or Degrees Acquired: _____

Experience: List experience you have working with animals, in a zoological park or related facility.
Attach a separate page if needed.

Facility _____ Location _____
Supervisor's Name _____ Your Position _____
Species You Worked with Directly _____

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IN YOUR OWN WORDS: Please describe in detail, on a separate hand written page, why you desire to become a zookeeper and what you feel you can contribute to the profession of Zookeeping.

All of the information on this application is true and correct

Signature _____ Date _____

Applying for course

_____ **ZTC 102 -- Introduction to Zookeeping and Zoo Public Relations**

_____ **ZTC 104 – Leadership in Zookeeping and Small Zoo Management**

Prerequisite ZTC 102, or Equivalent Experience
(To be determined by the Review and Acceptance Committee)

Start Date: _____ March 15, 2017 _____ June 14, 2017 _____ September 13, 2017

_____ November 8, 2017 Other _____

**Send this application, a current photo of yourself, and the
\$50.00 Registration Fee to**

**Cat Tales Zoological Training Center
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For more information call us (509) 238-4126 or email mail@cattales.org