



Biology and Conservation of Sea Turtles — International Field Course

August 12 - 24, 2018

Application Deadline: April 20, 2018

Application Form

First Name (as written in passport)			
Surname (as written in passport)			
Contact Address			
Nationality			
Gender			
E-mail contact		Skype address	
Telephone #	Day	Evening	
Date of Birth			
School/Employer			

Qualifications

Swimming Ability

Please Note - due to the strong emphasis on in-water work participants must be good swimmers capable of treading water (with flippers) for extended periods.

Strong

Medium

Physical Condition

(See below for medical information)

Good

Average

Experienced Snorkeler

You need to be able to snorkel for extended periods (up to 2 hours) and dive to 20 ft to catch turtles in a net.

Yes

No

Additional Information

Do you have a passport (valid for 6 months beyond August 2018) that will allow you to travel to Bermuda?
(We will need a copy of all travel documents by 1 June 2018)

Yes

No

Are you requesting scholarship funding?

Full

Partial

None

Have you applied for this course before?

Yes

No

How well do you communicate in English?

Poor

Fair

Fluent

How well do you understand written English?

Poor

Fair

Fluent

What is the extent of your formal training in biology?	
Describe any additional experience, particularly with sea turtles, that might help qualify you for this course.	
What opportunities will you have to apply what you learn on this course to conservation in your own country? Please submit a brief description along with your application (this can be supplied on a separate sheet). If you have had previous experience working with sea turtles, please provide a brief description of that work.	

Medical Information

Do you have any of the following:

	Yes	No
Allergies (if yes, please describe below)	<input type="checkbox"/>	<input type="checkbox"/>
Special diet required (if yes, please describe below)	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Heart problems	<input type="checkbox"/>	<input type="checkbox"/>
Other: specify		
Do you have any conditions that requires special consideration?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please describe		

Liability

Please ensure that you have liability/health insurance coverage

I release the Bermuda Aquarium, Museum and Zoo, the Atlantic Conservation Partnership, and the Bermuda Zoological Society, and collectively or individually its trustees, directors, officers, employees, representatives and host families from all actions, proceedings, claims and demands from all liability during my participation in this course.

Signature of applicant _____

Date _____

Please send completed application to : jmermaidgray@gmail.com

on or before 20 April, 2018

Students selected for the course are responsible for acquiring their own travel documents.
 Proof of a valid passport, required visas, and other necessary travel documents should be sent to:
jmermaidgray@gmail.com by 1 June 2018

Bermuda Zoological Society • P.O. Box FL145, Flatts, FLBX, Bermuda

