

Teaching Zoo

Zoo Animal Technology Program Application For Admission - Summer 2025

Last Name: Home Phone:									
Age: U.S. Veteran*	SF College ID#	: No				U.S. Citizen: If not U.S. Citiz	Yes	No	
		•			oses to co	mply with federa	•		
Gender:	Male Female Other:		Pronouns	: He/Him She/Her They/Th Other/As	em	His As		African	
	cation Inform		ed must he liste	ed. as well as a	all transcrir			_	
*All post-sec		ns attende	or have your G	ED by <u>May 1, 20</u>	025?	ots submitted to	SF College		_
*All post-sec Will you be g High School:	ondary institutio	ns attende	or have your G	ED by <u>May 1, 20</u> City:	<u>025?</u>	ots submitted to	SF College		_
*All post-sec Will you be g High School:	ondary institutio	ns attende	or have your G	ED by May 1, 20 City: ovide name of i	025? issuer:	ots submitted to	SF College State:		
*All post-sec Will you be g High School: If you receive Institution Na	ondary institutio raduated from hi	igh school equivalen	or have your G	ED by May 1, 20 City: ovide name of i	025? issuer:	ots submitted to Yes No	State:		
*All post-sec Will you be g High School: If you receive Institution Na	ondary institutio raduated from hi ed a high school nme:	igh school equivalen	or have your G	ED by May 1, 20 City: ovide name of i	025? issuer:	ots submitted to Yes No	State:	state: egree erned	Transcripts Sent
*All post-sec Will you be g High School: If you receive Institution Na	ondary institutio raduated from hi ed a high school nme:	igh school equivalen	or have your G	ED by May 1, 20 City: ovide name of i	025? issuer:	ots submitted to Yes No	State:	state: egree erned	Transcripts Sent

III. Related Volunteer Hours

*Documented on official agency/organization stationary and signed by volunteer coordinator/supervisor for point's consideration. Please only include if volunteer hours are relevant.

Agency/Organization Name	City	State	Start Date/ End Date	Total Hours Worked	Responsibility	*Documentation Included? Y/N

Office use only Received	date:
--------------------------	-------

IV. Work Experience

*Documented on official agency/organization stationary and signed by immediate supervisor for point's consideration.

Agency/Organization Name	City	State	Start Date/ End Date	Total Hours Worked	Responsibility	*Documentation Included? Y/N

V.	How did you learn about the Zoo Animal Technology Program?						
Googl	e Search (Te	erms searched):	Social Media (Specify)	Attend(ed) Santa Fe College			
Zooke	eper at Zoo	(Specify zoo and keeper):	Friend/Relative	Other (Specify):			
Media	- Podcast,	Youtube, TV (Specify):					
VI.	Are you	ı interested in pursuing a	Bachelor's degree?				
Yes	No	l already have my bachelor	's degree.				
VII.	Signatu	ire					
Signa	ture of Appl	icant:		Date:			

Return with applicable documents to Zoo Animal Technology

Program office either by mail, FAX, or email by 11/15/2024

for consideration. Information below:

Email: ZooAdvisor@SFCollege.edu

Mail: Santa Fe College

Zoo Animal Technology Program

3000 NW 83 Street

Gainesville, FL 32606

FAX: **352-395-7365**

Decision letters will be sent to applicants' Santa Fe College email address (SFID@go.sfcollege.edu).

*EA/EO: Santa Fe College (SF) is committed to maintaining a work and educational environment that embraces diversity and where no member of the college community is excluded from participation in, denied the benefits of, or subject to discrimination in any college program or activity based on: their race, ethnicity, national origin, color, religion, age, disability, sex, pregnancy status, gender identity, sexual orientation, marital status, genetic information, political opinions or affiliations, or veteran status. This commitment applies to employees, volunteers, students, and, to the extent possible, to third parties, applicants for admission, applicants for employment, and the general public.

Inquiries regarding non-discrimination policies or concerns about discrimination or harassment, including concerns about sexual harassment or sexual violence under Title IX, should be directed to: