



**CO-OP STUDENT APPLICATION
HAMILTON/BURLINGTON SPCA**

Date:	
Name:	
Address:	
Postal Code	
Preferred Phone Contact Number	
Email Address	
Name of School	
Co-op Teacher's Name & Preferred Phone Number	
Placement Dates Requested	Start Date: _____ End Date: _____
Placement Times Requested	Check ONE: AM <input type="checkbox"/> PM <input type="checkbox"/> FULL DAY <input type="checkbox"/>
Co-op Position applied for – please list in order of interest:	(1) _____ (2) _____ (3) _____
What are your career goals?	
Are there particular things you would like to learn during your placement?	
Please describe your skills or experiences that will help you as a Co-op student at SPCA?	
Please describe any past or current volunteer experience.	
Please describe any animal-related experience you may have for example, caring for pets, walking dogs.	

Please note: If you are applying to work with the shelter dogs you must have experience with different breeds and sizes of dogs.

Student Signature: _____ Date: _____

Revised August 2015