



## VETERINARY TECHNICIAN APPLICATION FORM

Please submit this application with:

***A cover letter, resume, two letters of recommendation,  
and a copy of your current grade transcript.***

Application materials should be sent as a complete packet.

Incomplete application packets may not be considered.

*Please type or print clearly.*

**Name:** \_\_\_\_\_

**Present Address or School Residence Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell phone/School Residence Phone:** \_\_\_\_\_ **Permanent phone:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**College/University:** \_\_\_\_\_

**Date(s) Available to Start** \_\_\_\_\_

Have you been convicted of or pleaded guilty to a felony or misdemeanor (other than a minor traffic violation) that has not been expunged or sealed by a court? (A conviction will not necessarily disqualify you from an apprenticeship. The effect of a conviction will be assessed with respect to time, circumstances, seriousness of the offense, and job responsibilities and duties. However, your failure to list a conviction or plea (except those that are protected from disclosure by state or local law) will disqualify you from consideration for an apprenticeship or will result in termination from the apprentice program if subsequently discovered). If yes, please state the nature of the conviction or plea, the date and explain.

\_\_\_\_\_  
**Nature of the conviction or plea**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Please Explain**

Have you ever been (1) the subject of a child abuse/neglect allegation that has been found substantiated by Child Protective Services or another governmental agency or (2) the subject of vulnerable adult or elder abuse/exploitation allegations that have been found substantiated by Adult Protective services or another governmental agency? (Answering affirmatively to this question will not necessarily exclude you from an apprenticeship with the Indianapolis Zoo, but the Indianapolis Zoo needs truthful and accurate information in response to this question in order to fully evaluate your apprenticeship application). If so, please explain the circumstances, the date, and the outcome.

\_\_\_\_\_  
**Please Explain**

I certify that this application was completed by me and that all entries and information in it are TRUE and COMPLETE to the best of my knowledge. I understand that false, misleading or omitted information in my application may result in the rejection of my application, the revocation of an apprenticeship offer or discharge.

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***Applicant Signature***

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***Application Date***

**Please submit completed application packet  
via email, fax or postal mail to:**  
Office of Volunteer Services  
1200 West Washington Street  
P.O. Box 22309, Indianapolis, IN 46222-0309  
Email to [agarrett@indyzo.com](mailto:agarrett@indyzo.com)  
Fax to 317-630-2031