

First Name	Last Name	DOB
Mailing Address		
Home Phone	Cell Phone	
Undergraduate School:	Degree: Year:	
Graduate School (if any):	Degree: Year:	
Formal Swim Experience (eg. Swim team, WSI instructor):		
Snorkel and SCUBA Experience:		
CPR Certification:		
Any Moving Violations (type and year):		
Specific Marine Biology Experience:		
Experience Working with Grade School Students:		

Feel free to use addition sheets of paper if necessary