SCDNR WILDLIFE MANAGEMENT INTERN PROGRAM APPLICATION

Name:			Date:	
Address:			Phone:	
City:	State:	Zip Code:		
E-Mail:		Hometown:		·
Valid driver's license?	Yes No If yes, Driver'	's License # and State	of Issue:	
Name of Educational Institut	ion:		Major:	
How many credit hours have	you completed in your major	r area of study?		
Cumulative GPA?	Expected	Graduation Date:		
My primary area of interest i	s: Wetlands Habitat Manage	ement	_ Uplands Habitat Management	
Game Species Mgt.	Nongame Species M _{	gt	No Preference	
I am willing to work in:				
Columbia	Clemson F	lorence	BonneauGeorgetown	
McClellanville	Green Pond E	Eutaw Springs	Other (Specify)	
No Preference				
Academic Advisor Signature		Date		
Please provide two reference	es who are not relatives and a	a current resume not	to exceed two pages.	
Name		Phone	<u>,</u>	
Name		Phone	<u>,</u>	
Send this application, a resu	me, and unofficial transcript	s to:		
Email Address: Mailing Address:	WildlifeInterns@dnr.sc.g Willie E. Simmons, Jr. South Carolina Departme P.O. Box 167 Columbia, SC 29202 803-734-3898		:es	
Electronic submissions	s are preferred			

Deadline for submission is Oct. 30, 2024