OCEANOGRAPHIC ENVIRONMENTAL RESEARCH SOCIETY (OERS)

COURSE APPLICATION
Cover Page

FIRST NAME: _____ LAST NAME: _____

CHECKLIST:

- ☐ Completed Course Application
- ☐ non-refundable deposit $500* (*please make cheque payable to OERS*)
- ☐ Reference Letters (*only if requested*)
- ☐ Current Resume (*if applicable*)

PLEASE INDICATE WHICH COURSE YOU ARE APPLYING FOR:

- ☐ OERS - F500 - Marine Mammal Necropsy - OERS course fees* apply
- ☐ OERS - F600 - Living Marine Mammals Mexico - OERS course fees* apply
- ☐ other: _____

** all fees are used in support of OERS' mandates including research. Once candidate is accepted into the course, the balance of fees are due; exact amount for total OERS fees may vary yearly - details on OERS website. Candidate cannot begin the course until OERS course fees are paid in full. If candidate chooses to not pursue course after admission, they forfeit the deposit. Once balance of payment is received, if candidate does not participate/complete the course no refunds are issued.*

DECLARATION:

☐ I agree by my submission of this application to abide by the terms of all OERS courses and do not hold OERS responsible in any way for anything untoward that may occur either as a direct or indirect result of my participation in this course.

☐ I hereby certify that all information provided in this application (including cover page) is complete and correct and I authorize OERS to verify any information provided as part of this application. I understand that falsification of information in this application/supporting documents is grounds for non-admission, or after admission, grounds for dismissal & forfeiture of fees paid.

SIGNATURE: _____ DATE: _____

(*I have read the information and the instructions for this application*)

Full NAME: _____
(Print)

OCEANOGRAPHIC ENVIRONMENTAL RESEARCH SOCIETY (OERS)

COURSE APPLICATION FORM

1. CONTACT INFORMATION:

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ CITY: _____

PROVINCE/STATE: _____ COUNTRY: _____ POSTAL/ZIP CODE: _____

HOME #: _____ WORK #: _____ MOBILE #: _____

(including country + area code) (including country + area code) (including country + area code)

EMAIL: _____

PLEASE INDICATE YOUR PREFERRED METHOD(s) OF CONTACT:

☐ HOME ☐ WORK ☐ MOBILE ☐ EMAIL

2. BIOGRAPHICAL INFORMATION:

COURSE APPLYING FOR: _____

Are you of legal age (>18 years old)? ☐ Yes ☐ No*

*if no, a letter a letter from a parent or guardian required

LEVEL OF EDUCATION (check all that apply): ☐ HIGH SCHOOL ☐ COLLEGE ☐ UNIVERSITY ☐ OTHER

Please elaborate: _____

3. CHECK THOSE THAT APPLY:

☐ I have experience working with marine animals.

Specifics: _____

☐ I am a certified diver. LEVEL OF CERTIFICATION: _____ DATE OF CERTIFICATION: _____

SPECIALTY: _____

☐ I have computer experience.

☐ I have my own transportation. PLEASE SPECIFY: _____

FIRST NAME: LAST NAME:

4. ANSWER THE FOLLOWING IN DETAIL:

Special skills/interests relevant to the course you are applying for?

Please state briefly what you hope to gain from this course.

PLEASE FILL IN ELECTRONICALLY, PRINT, AND MAIL TO:
OERS, 12 BURTON AVE., BARRIE, ONTARIO, CANADA, L4N 2R2

Print Form Reset Form

Internal Use Only

File #:

Person Accepting Request:

Date Received: Action Taken: