



NORTH-CAROLINA
AQUARIUM
at Fort Fisher

900 Loggerhead Road, Kure Beach, NC 28449 • www.ncaquariums.com/fort-fisher
Phone: (910) 772-0500 • Fax: (910) 458-6812

Application for School Required Community Service (Senior Projects & Job Shadows)

Name: _____
Address: _____

Phone: _____ Email: _____
School: _____
Teacher: _____
Date of birth: _____

1. Please describe what is expected of you for your school required community service.

2. How many volunteer hours are required for your class? _____

3. Are you applying to fulfill the requirements for a Senior Project? If no, skip to #7.

_____ Yes _____ No

4. Do you need a mentor for your Senior Project?

_____ Yes _____ No

5. Do you need the Aquarium's help to develop a product for your Senior Project?

_____ Yes _____ No

6. If yes to #5, do you agree to do a Clean-Up Event or Beach Sweep as your product? *we cannot tailor products to a specific project topic

_____ Yes _____ No

7. Why are you interested in completing your service experience at the Aquarium?

8. What do you hope to learn from this opportunity?



Department of Natural and Cultural Resources
Pat McCrory, Governor • Susan Kluttz, Secretary • David R. Griffin, Division Director





NORTH • CAROLINA
AQUARIUM
at Fort Fisher

900 Loggerhead Road, Kure Beach, NC 28449 • www.ncaquariums.com/fort-fisher
Phone: (910) 772-0500 • Fax: (910) 458-6812

Student Acknowledgment:

I certify the statements made in this application are true and correct. I authorize verification of all information contained in this application.

I understand I will not be paid for my services at the Aquarium, and filling out an application for the program does not guarantee acceptance.

I understand while a student completing service at the North Carolina Aquarium, I will be expected to demonstrate a serious commitment to uphold the mission of the Aquarium, to maintain an environment of integrity for people and the animals, and to focus on customer service, with respect for all employees, volunteers and guests. I agree to follow all Aquarium guidelines and policies.

Signature _____ Date _____

Parent/guardian consent:

As a parent or legal guardian of this applicant, I certify that the above information is true and correct.

Signature _____ Date _____

Please send completed application by mail or email to:

Marissa Blackburn
Education Program Specialist
900 Loggerhead Rd. Kure Beach, NC 28449

marissa.blackburn@ncaquariums.com
910-772-0508



Department of Natural and Cultural Resources
Pat McCrory, Governor • Susan Kluttz, Secretary • David R. Griffin, Division Director

