



# C.A.U.S.E. PROGRAM APPLICATION

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Date of birth: \_\_\_\_\_ Age: \_\_\_\_\_

## *Experience*

### **Paid jobs:**

1. Name of business: \_\_\_\_\_  
Position held: \_\_\_\_\_  
How long did you work there? \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_

2. Name of business: \_\_\_\_\_  
Position held: \_\_\_\_\_  
How long did you work there? \_\_\_\_\_  
Duties: \_\_\_\_\_  
\_\_\_\_\_

### **Volunteer jobs:**

1. Name of institution: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
How long did you work there: \_\_\_\_\_  
Reason for volunteering: \_\_\_\_\_

2. Name of institution: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
How long did you work there: \_\_\_\_\_  
Reason for volunteering: \_\_\_\_\_

## *Essay*

To complete your application attach a one page essay telling us how the CAUSE program fits into your future goals.

(Incomplete applications will not be considered)

Please hand completed  
form  
to school staff in charge  
of applications  
or Mail to:  
Attn: CAUSE Program,  
New Jersey Academy for  
Aquatic Sciences  
1 Riverside Drive,  
Camden, NJ 08103

### Special thanks to our contributors

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