

Application for Internship

Jewish Museum

Date: ___ / ___ / _____

Last Name: _____ First Name: _____ MI: _____

Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Social Security #: _____ - _____ - _____

Phone: (_____) - _____ - _____ Age (If under 18): _____

Education

Current

Name of Institution: _____

Type of Degree/Diploma: _____ Course of Study: _____

Anticipated Graduation Date: ___ / ___ / _____

Number of Credits Completed: _____ Grade Point Average (GPA): _____

Previous

Name of Institution: _____

Type of Degree/Diploma: _____ Course of Study: _____

Graduation Date: ___ / ___ / _____

Number of Credits Completed: _____ Grade Point Average (GPA): _____



List of Special Skills and Abilities

For example, foreign languages, computer skills, office machines, typing, etc.:

Availability

Dates Available: From ___ / ___ / _____ to ___ / ___ / _____

Please fill in the hours you are available to work in the chart provided.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday

Total Number of Hours Desired: _____ Hours Per Week Desired: _____

Type of Internship Sought: _____

Employment History (Start with most recent)

Company Name: _____ Position: _____

Address: _____

Supervisor's Name: _____ From: ___ / _____ to ___ / _____

Salary: _____ Reason for Leaving: _____

Briefly describe duties and responsibilities: _____

Phone: (___) - ___ - _____

May we contact your supervisor for a reference? **Yes** **No**

Company Name: _____ Position: _____

Address: _____

Supervisor's Name: _____ From: ___ / ___ / ___ to ___ / ___ / ___

Salary: _____ Reason for Leaving: _____

Briefly describe duties and responsibilities: _____

Phone: (___) - ___ - _____

May we contact your supervisor for a reference? **Yes** **No**

Personal Statement

Please let us know about you, including your interests, goals, and hobbies:

List of References and Contact Information (Please no relatives):

Name: _____ Title: _____

Company: _____

Address: _____

Phone: (____) - ____ - ____ Email: _____

Relation: _____

Name: _____ Title: _____

Company: _____

Address: _____

Phone: (____) - ____ - ____ Email: _____

Relation: _____