

TIMKEN MUSEUM OF ART

INTERNSHIP APPLICATION

Internship Application for: ___ Spring (Feb.-May) ___ Summer (May-Aug.) ___ Fall (Sep.-Dec.)

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____

E-mail Address _____

Currently enrolled in school? ___ Yes ___ No

If no, check highest degree ___ High School ___ 4-yr. College ___ Graduate School

If yes, name of school you are attending _____

Are you a ___ Full Time or ___ Part Time Student

Are you a ___ Freshman ___ Sophomore ___ Junior ___ Senior

Major _____

Minor _____

Expected date of graduation _____

List foreign languages you know and your proficiency in each (fluent, reading, speaking) _____

Hours per week desired or available _____

Reasons for seeking this internship _____

Previous related experience _____

Special interests/hobbies/skills _____

Attach a **letter of interest**, **resume** and **two letters of recommendation** and send or fax it to:

Education Department
Timken Museum of Art
1500 El Prado
San Diego, CA 92101
Fax: 619-531-9640

No phone calls, please. Only selected individuals will be notified and contacted for interviews.