



# TIMKEN MUSEUM OF ART

## DEVELOPMENT DEPARTMENT 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:

Development Department  
Attn: Alexandra Riley  
Timken Museum of Art  
2550 5th Avenue  
Suite 500  
San Diego, CA 92103  
Fax: 619-531-9640

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