

| THIS PDF IS AN INTERACTIVE FORM.        |
|---|
| Type in your information, using the     |
| "tab" key to move from field to field.  |
| When complete, print or save a copy for |
| your records and e-mail application to  |
| internships@artsmia.org.                |

### **CURRENT CONTACT INFORMATION**

| CORRENT CONTACT INFORMATION  |
|--|
| Name   |
| Mailing Address (where you may be reached during the application period):                              |
| Street City, State, ZIP  |
| Country E-mail Address   |
| PERMANENT CONTACT INFORMATION  |
| Street City, State, ZIP  |
| Country E-mail Address   |
| Telephone numbers: Cell phone Other  |
|  |
| CURRENT STATUS Current status of applicant:  |
| □ Undergraduate student □ Graduate student □ Other (specify)   |
| Currently enrolled at or graduate of   |
| Citizenship (specify type of visa if not a United States citizen)                                      |
| DATES & SCHEDULE Proposed dates and schedule for your internship at the Minneapolis Institute of Arts: |
| Winter/Spring (beginning January)  |
| Summer (beginning May/June)  |
| Fall/Winter (beginning September)  |
| Will you be able to work (choose one):   |
|  |
|  |
|  |



### THIS PDF IS AN INTERACTIVE FORM. Type in your information, using the "tab" key to move from field to field. When complete, print or save a copy for your records and e-mail application to <u>internships@artsmia.org</u>.

**MUSEUM INTERESTS** Please indicate the museum division/department in which you would like to intern. Choose your top two or write in another specific area of interest:

#### Choose from the following:

### CURATORIAL

Africa, Native America Contemporary Art Decorative Arts, Textiles, Sculpture Paintings Photography, New Media Prints & Drawings Minnesota Artists Exhibition Program

#### OPERATIONAL

Development, Membership Friends of the Institute Information Systems Interactive Media Learning & Innovation Library/Archives Marketing Press, Public Relations Registration Retail (Museum Shop) Visitor & Member Services Visual Resources

#### SELECTIONS

First choice

Second choice

Other

### ACADEMIC STATUS

If you are a student, what is your current academic status (year and major)?

Cumulative grade point average

Grade

Grade point average in field of study

Degree expected, institution, and anticipated date of graduation

All degrees held, institutions, and graduation dates

Institutions from which transcriptions have been sent

Related work experience



| THIS PDF IS AN INTERACTIVE FORM.        |
|---|
| Type in your information, using the     |
| "tab" key to move from field to field.  |
| When complete, print or save a copy for |
| your records and e-mail application to  |
| internships@artsmia.org.                |

**SPECIAL SKILLS** Please list special skills that you can bring to an internship (such as foreign languages, office, computer, research, public speaking):

**REFERENCES** Names and addresses of two people from whom you have requested references. Please have reference letters e-mailed directly to internships@artsmia.org. If you are applying as a professional, one reference should be from your present employer:

| Name   |
|--|
| E-mail address   |
| Name   |
| E-mail address   |
|  |
| How did you learn about the Minneapolis Institute of Arts Internship Program?  |
|  |
| <ul> <li>Prepare an essay of 300 to 500 words on the following page. Please address the following points:</li> <li>Why you are seeking an internship.</li> <li>How it relates to your academic or professional development and goals.</li> <li>Why you would like to intern in the area(s) you have designated.</li> <li>What you hope to gain from the experience.</li> <li>What you believe you can contribute.</li> </ul> |
| I understand that any offer of an internship from the Minneapolis Institute of Arts will be conditional on my satisfactorily fulfilling all background check<br>requirements. This may include, but is not limited to, criminal and/or credit background checks. I allow my typewritten name below to serve as my signature.<br>Signature Date   |
|  |



| THIS PDF IS AN INTERACTIVE FORM.        |
|---|
| Type in your information, using the     |
| "tab" key to move from field to field.  |
| When complete, print or save a copy for |
| your records and e-mail application to  |
| internships@artsmia.org.                |

| Name |
|------|
|------|

Essay