



### INTERN APPLICATION

| PERSONAL  |        |            |               |                |          |
|---|--------|------------|---------------|----------------|----------|
| Last Name   |        | First Name |               | Middle Initial | Date     |
| Home Address  | Street | Apt        | City          | State          | Zip Code |
| Home Phone Number and/or Message/Cell Phone #<br>( )<br>( ) |        |            | Email Address |                |          |
| How did you hear about Pretend City Children's Museum?      |        |            |               |                |          |
| How did you hear about this position?                       |        |            |               |                |          |

| INTERN AVAILABILITY & INTERESTS   |   |  |                    |                   |                 |                   |
|---|---|--|--------------------|-------------------|-----------------|-------------------|
| Days & Times Available: (Please Circle)                                       |   |  |                    |                   |                 |                   |
| Sunday<br>AM PM   | Monday<br>AM PM                                       | Tuesday<br>AM PM                                     | Wednesday<br>AM PM | Thursday<br>AM PM | Friday<br>AM PM | Saturday<br>AM PM |
| How often would you enjoy interning?  |   |  |                    |                   |                 |                   |
| Are there any days and/or hours that you are not available to intern?         |   |  |                    |                   |                 |                   |
| Why did you become interested in interning at Pretend City Children's Museum? |   |  |                    |                   |                 |                   |
| Please check areas of interest/skills you can offer:                          |   |  |                    |                   |                 |                   |
| <input type="checkbox"/> Advertising  | <input type="checkbox"/> Financial/Investor Relations | <input type="checkbox"/> Early Childhood Development |                    |                   |                 |                   |
| <input type="checkbox"/> Artist   | <input type="checkbox"/> Fundraising                  | <input type="checkbox"/> Media Relations             |                    |                   |                 |                   |
| <input type="checkbox"/> Art Making   | <input type="checkbox"/> General Office               | <input type="checkbox"/> Photography                 |                    |                   |                 |                   |
| <input type="checkbox"/> Board/Committee                                      | <input type="checkbox"/> Grant Writing                | <input type="checkbox"/> Publicity                   |                    |                   |                 |                   |
| <input type="checkbox"/> Data Entry   | <input type="checkbox"/> Graphic Design               | <input type="checkbox"/> Public Speaking             |                    |                   |                 |                   |
| <input type="checkbox"/> Education  | <input type="checkbox"/> Helper: Birthday Parties     | <input type="checkbox"/> Research                    |                    |                   |                 |                   |
| <input type="checkbox"/> Event Planning                                       | <input type="checkbox"/> Helper: Special Events       | <input type="checkbox"/> Strategic Planning          |                    |                   |                 |                   |
| <input type="checkbox"/> Financial/Investor Relations                         | <input type="checkbox"/> Marketing                    | <input type="checkbox"/> Story Telling               |                    |                   |                 |                   |
| <input type="checkbox"/> Human Resources                                      | <input type="checkbox"/> Other                        | <input type="checkbox"/> Translator                  |                    |                   |                 |                   |
|   | <input type="checkbox"/> Operations                   |  |                    |                   |                 |                   |

**EMPLOYMENT HISTORY/SKILLS**

| Employer | From  | To    | Job Title (s) |
|----------|-------|-------|---------------|
| _____    | _____ | _____ | _____         |
| _____    | _____ | _____ | _____         |
| _____    | _____ | _____ | _____         |

If currently employed, may we contact you current employer?     YES     NO

**PERSONAL REFERENCES**

| Name<br>Number | Relationship | Address | Phone |
|----------------|--------------|---------|-------|
| _____          | _____        | _____   | _____ |
| _____          | _____        | _____   | _____ |

**GENERAL INFORMATION**

|  |   |
|--|---|
| Are you able to perform the essential functions of the job for which you are applying for, either with or without reasonable accommodation?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | If no, describe the function that cannot be performed.  |
| Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?<br><i>Convictions of marijuana-related offenses that are more than two years old need not be listed.</i><br><input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, state nature of the crime(s), when and where convicted and disposition of the case. <i>(Note: No applicant will be denied solely on the grounds of conviction of a criminal offense.)</i> |

**INTERN'S CERTIFICATION, AGREEMENT AND NOTICE**

I certify that all information in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteer service and may result in my dismissal, if discovered, at a later date.

\_\_\_\_\_

Applicant's Name (Please Print)                      Applicant's Signature                      Date

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_