

INTERN APPLICATION FORM

314.746.4599
www.mohistory.org



GENERAL INFORMATION

Name: _____
Last First Middle

Address: _____
Number Street City State Zip Code

Telephone: () _____ E-Mail Address: _____
Area Code

Availability: Full Time Part Time

Project applying for: _____ Term of application: _____

College or University: _____

Degree awarded: _____ Anticipated graduation date: _____

Will you seek academic credit for this internship? Yes No

If you are seeking academic credit, does your university have guidelines or requirements regarding your internship experience? Yes No *(If possible, please include a copy of these guidelines.)*

ATTACHMENTS

Please attach the following materials as part of your application:

Cover Letter

In your cover letter, specify a minimum of three positions you are interested in, and rank them according to your preference.

Resume

Attach a detailed resume describing relevant coursework, previous work and/or internship experiences that relate to the internship project.

Letters of Recommendation

Provide at least two letters of recommendation from current or former professors or employers.

Please check appropriate box. Letters are included Letters will be sent separately

Please return application and attachments to:

Mel Carr
Director of Human Resources
c/o Natasha Johnson
Missouri History Museum
P. O. Box 11940
St. Louis, MO 63112-0040