



Samuel P. Harn Museum of Art Internship Application Form

Please answer all questions completely by typing answers in the designated fillable areas. For instructions, see www.harn.ufl.edu/internships/. Internships are only open to active students. Submit the completed application to the Internship Coordinator at register@harn.ufl.edu

First Name	Last Name	Preferred Name	Preferred Pronouns
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Current Address	Valid Through (Date)
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City	State	Zip Code	Country of Citizenship
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Phone Number	UF ID #	Email Address
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Permanent Address

City	State	ZIP Code
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Indicate which semester(s) & year you are applying for:

Fall 20____ Spring 20____ Summer 20____

Are you enrolled in the UF Museum Studies program?

Yes No Undecided

Are you applying for course credit for this internship?

Yes No

SCHOLARSHIPS

The Harn Museum of Art Internship Program will provide funding to every eligible applicant selected for a project. As part of the selection process, please respond to the questions in Page 2 & Page 3. For more information about specific scholarship funds, please review the Internship Instructions document at harn.ufl.edu/internships/.

1. **Scholarship short response.**

Key strategic goals of the Harn Museum of Art are to be inclusive and welcoming and to serve a diverse public. Briefly discuss how your academic activities and life experiences would contribute to your role as an intern supporting these goals. In your response you may address your background, student and extracurricular activities, museum experience, and/or any other information you think would be relevant here.

Use this space or attach a separate page

2. **Scholarship Impact** - How will a funded internship make a difference to your college experience?

Use this space or attach a separate page

Department and Project Selection

Please list below the project you are applying to, the project supervisor, and the corresponding Harn Department. For a list of current project descriptions, go to www.harn.ufl.edu/internships/. If you are submitting a student-initiated proposal (optional), indicate this in the “project” space by writing “SIP.”

Internship Project

Supervisor/s

Harn Museum Department

Availability Information

The following information is necessary for proper internship placement. **Please note that our program's policy requires the project supervisor to be on-site while the Intern is at the Harn Museum.** Most museum staff members work a standard work week (8 AM to 5 PM, M-F), although the Harn Museum of Art is open to the public Tuesday through Saturday from 10 AM to 5 PM, Thursday evenings from 5 PM to 9 PM, and Sunday from 1 PM to 5 PM. Please keep these hours of operation in mind as you make a tentative schedule; work hours will ultimately be dictated by the requirements of the specific internship for which you are applying.

I am prepared to work the required number of hours as indicated in the project description.

Yes

No

Signature

I authorize and release the University of Florida to verify all information submitted in support of my application, including but not limited to my application and résumé. I certify that the application and/or résumé submitted are a complete and accurate description of my work experience, education and background. I further certify that the answers to the above questions are true and complete to the best of my knowledge.

Signature

Date

Remember to include additional required materials. Submit your application via email to the Internship Coordinator at register@harn.ufl.edu

Cover letter (letter of intent)

Résumé

Transcript

Two recommendation forms (pages 5 & 6 of this document)

Writing or graphic design samples (if appropriate)



NOTE TO APPLICANT: Please provide this form to your recommender. Separate reference letters can be submitted directly to our Internship inbox at register@harn.ufl.edu, specifying the applicant's name in the subject line.

Applicant's Name

Reference Contact Information

Form fields for Reference Contact Information: First Name, Last Name, Title, Organization/Affiliation, Mailing Address, City, State, Zip, Telephone, Email.

Relationship to Applicant

Recommendations may be letters, short answers or bullet-points. Please address the following.

- Checklist of recommendation questions: How long and in what capacity have you known the applicant? How is this project significant to the applicant's educational and/or professional development? How would you assess the applicant's ability including: strengths, talents & seriousness of purpose? How does this candidate rank compared to others you have recommended for similar opportunities in recent years? Please state any reservations you have about this applicant's ability to successfully complete this internship.

Signature of Recommender Date



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Signature of Recommender Date