

Internship Application

Please submit the following application, cover letter and resume to:

Children's Museum of Phoenix ATTN: Internship Program 215 N. 7th St., Phoenix, AZ 85034

OR

Fax: (602) 307-9833 jszczech@childmusephx.org

All considered applicants must pass a background check provided by the children's museum.

Name:						
Address:			City	Stat	eZip	
Phone #:			Email	:		
Student: College/Univers	sity:					
Major:			Minor (not required):			
Grade Level: (C	Circle)					
Freshman	Sophomore	Junior	Senior	Recent Graduate	Graduate Student	
Professional:	se.					

When would you like to intern? (C	ircle)					
Summer (June – August)	Fall (September – December)	Spring (January – May)				
How many hours can you intern pe	er week?					
What days are you available? Duri	ng what hours?					
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
What are your long-term career go						
What skills can you contribute to the Children's Museum of Phoenix team?						
What skills do you hope to gain from	om your experience at the Children	s's Museum of Phoenix?				
How did you learn about our interr	nship program?					

Interest Areas (Please circle all that apply) Front Desk (administration office and registration desk) Special Events (mainly after hours events) Education Floor Facilitation (working with patrons in an exhibit area) Exhibits Department (after hours cleaning) Marketing/Development Department (museum outreach and fundraising) Other areas:

If any indicated, please briefly explain interest.

Computer Skills:

Microsoft Outlook

Microsoft Word

Microsoft Excel

Raiser's Edge

Patron's Edge

Adobe Photoshop

Other:

Thank you for your interest!

Children's Museum of Phoenix will contact you shortly for an interview.

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