

Internship Registration Form

| Name: | | | | | | | | | | |
|---|---------|-----|--------|---------|----------|----------|------|--------|---------------|----------|
| Mailing Address: | | | | | | | | | | |
| Phone #: | | | | | | | | | | |
| E-mail: | | | | | | | | | | |
| Permanent Address: _ | | | | | | | | | | |
| Are you a U.S. citizen? □ Yes □ No | | | | | Count | ry: | | | | |
| College/University: | | | | | | | | | | |
| Major(s): | | | | | Minor | (s): | | | | |
| Date of Graduation: _ | | | | | | | | | | |
| | ucatior | n 🗖 | Film | □ De | evelopme | ent 🗖 | | ing [| 1 Ever | nts |
| Internship Semester: | ☐ Fo | | Spring | | Summer | | | TILLID | | EDI |
| Availability: | MON | | TUE | | | WED | | THUR | | FRI |
| Morning (8:30-Noon) | | | | | | | | | | |
| Afternoon (1:00-5:00) | | | | | | | | | | |
| (EVENT INTERNSHIP AP availability. No other | | | _ | | | | | | | dicate |
| · | MON | | | e scrie | wed au | iing eve | THUR | week | FRI | |
| Evening: | | _ | TUE | _ | WED | _ | INUK | _ | ГKI | – |
| | SAT | | SUN | | | | | | | |
| Relevant Courses: | | | | | | | | | | |
| Languages: Fre | | | | • | | | r: | | | |

Completed applications and supporting materials should be mailed to:

Bryon Chambers, Assistant Curator of Education Attn: Internship Program

Oklahoma City Museum of Art 415 Couch Drive Oklahoma City, OK 73102

Please direct questions to bchambers@okcmoa.com or 405-278-8212 (800-579-9278, ext. 212)