



**INTERNSHIP APPLICATION**

**Contact Information**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_  
 Email: \_\_\_\_\_

Why are you interested in interning at HHS?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Describe any outside interests or skills you could bring to your internship:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Check the internship you are interested in applying for:

- Archaeology                       Communications  
 Archives                               Grant Research  
 Collections                          Programming & Education

Please indicate the days and times you are available:

	MON	TUES	WED	THURS	FRI	SAT	SUN
AM							
PM							

Will you be completing this internship for credit from your college or university and if so, how many credits? \_\_\_\_\_

How many hours do you intend to complete? \_\_\_\_\_

Are there any physical limitations that should be considered? (If so, please explain)

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**Emergency Contact Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Background Information**

Education (school, degree, major/concentration, year):

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Personal Experience:

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Volunteer Experience:

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References – Names and Contact Information

1. \_\_\_\_\_
2. \_\_\_\_\_

Thank you for your interest in Historic Huguenot Street. If you have any questions, please e-mail Kara Augustine at [kara@huguenotstreet.org](mailto:kara@huguenotstreet.org) OR call at (845) 255-1660