

## ARTS MANAGEMENT INTERNSHIP APPLICATION

Plea	se type or print <u>clearl</u>	<u>y</u> .					
FUL	L NAME:						
	Last			First		Middle	
CURRENT ADDRESS:					PERMANENT ADDRESS:		
Street				_	Street		
Apt./P.O. Box				_	Apt./P.O. Box		
City		State/Province	Zip/Postal Code	_	City	State/Province	Zip/Postal Code
PHONE NUMBER:				_	CELL NUMBER:		
EM/	NL:			_			
UNI	/ERSITY NAME:			_			
				_	City		State
	Major				Minor		
	Year in School		GPA	_	Expected Graduation Da	ate	
	Faculty Advisor			_			
	Advisor Email			_	Advisor Phone		
IF A	CCEPTED, PLEASE	LIST YOUR AVAILA	ABILITY:				
Start Date				_	End Date		
Will	you be able to sta	ay through Labor D	ay? □ YES □	NO	Through mid-Octo	ber? 🗆 YES 🗅 NO	
Do	you have a valid d	river's license?	YES NO				
Do you have a car available to you during your internship? ☐ YES ☐ NO							
Will	you require housi	ng? ☐ YES ☐ N	IO				
	-						

## **ADDITIONAL REQUIREMENTS:**

- Résumé
- Cover letter containing a personal statement about what your expectations are and why you are applying for an internship at Francis Hardy Center for the Arts, Inc. ("The Hardy Gallery").
- Two letters of recommendation from individuals who can write about your character, background and skills in the visual arts and/or arts management and your ability to learn. Please send separately in a sealed envelope with original signatures.
- Writing sample (no more than 3 pages, please).

PLEASE FEEL FREE TO PROVIDE US WITH ANY ADDITIONAL INFORMATION WHICH YOU FEEL WILL HELP US IN EVALUATING YOUR APPLICATION.

All applications must be postmarked by Friday, March 24, 2017. For questions please contact Adam Fulwiler, Executive Director, at <a href="mailto:afulwiler@thehardy.org">afulwiler@thehardy.org</a> or 920.854.2210.

## SEND APPLICATION PACKET TO:

Arts Management Internship Program The Hardy Gallery P.O. Box 394 Ephraim, WI 54211