

MUSEUM INTERN APPLICATION

DATE of Application:	
NAME:	
UCSB EMAIL:	PHONE:
MAJOR(S):	MINOR(S):
YEAR:	GPA:
STARTING DATE:	HOUDS/DAVS you will be evailable
STARTING DATE:	HOURS/DAYS you will be available
PERSONAL INFORMATION	
Emergency Contact	
Relationship	Emergency Phone ()
Physical Limitations for desired position (if any):	
Triysical Elimitations for desired position (if arry).	

Please answer the following questions:

Why do you want to intern at the PCVF Museum?

Describe any skills, abilities, or experience you have that would aid the PCVF in its ongoing collection inventory (for example: computer programming or database management, photography/digital imaging, filing/data entry, historical research, museum studies training, experience working in museum collection):

REFERENCES : Please supply the names, phone numbers and addresses of three (3) references:		
1) Name	Phone ()	
Address		
email Address		
2) Name		
Address		
email Adress		
3) Name		
Address		
Email Adress		

Submit your application via email to: media@pcvf.org