INTERNSHIP APPLICATION

Troy Historic Village 60 W. Wattles Rd. Troy MI 48098 248-524-3570



NAME:	TERM/YEAR:			
ADDRESS:				
(Street)				
(City)		(State)	(Zip Code)	
PHONE:	EMAIL:			
MAJOR:	EX	EXPECTED GRADUATION DATE:		
DATE OF BIRTH:	DRIVER'S LI	C. #		
Have you ever been con	victed of a crime? If y	es, please explain:		
What day/times are you	available to work?			
Will you be seeking acad	lemic credit for this internshi	o?		
 Two letters of recom Statement of intent. 	ving materials with this form: imendation. Faculty recomme Explain in one page why you e experience. Indicate your a	ı are applying for this p		
American History/ResearchMuseum StudiesArchive ManagementNonprofit ManagementEnglish/JournalismMarketing		Historic Preservat Education	Accounting and Finance Historic Preservation	
I certify that the above i	nformation is true.			
(Name Printed)	 (Signature)		(Date)	