High School Internship Application

This application must be typed or printed in black or blue ink and accompanied by a resume.

Application Deadline May 25, 2016

| Name | |
|-------------------------------------|---|
| Address | |
| City, State, Zip | |
| Home Phone | |
| Cell Phone | |
| Email Address | |
| High School | |
| | Grade Level (in fall 2016) |
| Name of Parent or Guardian | |
| Daytime Phone Number of Parent or G | Guardian |
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| | e High School Internship Program? How might this program ht it benefit you in the pursuit of your future goals? |
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| Do you currently visit museums or galleries? What could be done to make museums more engaging to teens and young adults? |
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| What specific qualities do you feel you would bring to the High School Internship Program? How would your participation enhance this program? |
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| Please list anything else about yourself that you think might be important. |
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Please return this application and your resume by May 25, 2016 to:

Amber Edwards, Education Coordinator Education Department Los Angeles County Museum of Art 5905 Wilshire Boulevard Los Angeles, California 90036

> Phone 323 857 6141 Fax 323 857 4729 Email: aedwards@lacma.org