

OHR-O'KEEFE MUSEUM OF ART

Internship Program

Last Name: _____ First Name: _____

Address: _____

Phone Number: _____ E-mail Address: _____

College/University: _____

Major/Degree: _____ Graduation Date: _____

Will you be receiving academic credit from your university? ____ Yes ____ No

Courses relevant to this internship: _____

Department Choices:

Refer to the list of Museum departments and indicate three specific department choices (in order of preference).

1. _____

2. _____

3. _____

Select one: I am interested in a wide variety of museum functions and would accept any placement that matches my skills. ____ Yes ____ No

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Work/Volunteer Experience:

Company/Organization	Position	Dates

The attached essay should be no longer than 500 words: Why are you interested in participating in an internship at the Ohr-O'Keefe Museum of Art? Describe your specific interests, skills, and experiences.

Application packet checklist:

- _____ Completed application form
- _____ Resumé
- _____ Academic transcript
- _____ Essay
- _____ Two academic or professional letters of recommendation

Send completed application to:

Education, Internship Program
Ohr-O'Keefe Museum of Art
P.O. Box 248
Biloxi, MS 39533

For more information:

Call: 228-374-5547
Email: visitorinfo@georgeohr.org
Visit: www.georgeohr.org/internships

For Office Use only

Application received _____

Interview _____

Ohr-O'Keefe Museum of Art
386 Beach Boulevard, Biloxi, MS 39530
228-374-5547