

☐ Wednesday _____

National Museum of the American Sailor 2531 Sheridan Road, Building 42 Great Lakes, IL 60088 847.688.3154 nmas.fct@navy.mil

National Museum of the American Sailor Internship Application

Contact Information Applicant Name: _____ Mailing Address: ______ Telephone: Email Address: College or University: ______ Major: _____ Date of Graduation: _____ Do you plan to receive college credit for this internship? ☐ Yes □ No **Internship Details** Proposed beginning and ending dates of internship: ______ Check the area(s) in which you have experience: ☐ Archives ☐ Historical Research and Writing ☐ Collections ☐ Public Relations □ Education ☐ Social Media ☐ Graphic Design ☐ Curatorial/Exhibits List day(s) and times you are available: ☐ Monday □ Thursday ☐ Tuesday _____ ☐ Friday _____

☐ Saturday _____



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Why are you interested in an internship at the National Museum of the American Sailor?
Briefly describe any education or work experiences you have had that may relate to the work of a National Museum of the American Sailor internship.
How did you hear about the National Museum of the American Sailor's internship program?