



# Virginia Holocaust Museum

*We Remember*

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## VHM Internship Application Form

Please attach Resume.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

School Address: \_\_\_\_\_  
\_\_\_\_\_

Permanent Address: \_\_\_\_\_  
\_\_\_\_\_

School: \_\_\_\_\_ Major: \_\_\_\_\_

Current Academic Status: \_\_\_\_\_

Work History (Please attach a resume if available): \_\_\_\_\_  
\_\_\_\_\_

Starting Date/Ending Date: \_\_\_\_\_

Hours of Availability: \_\_\_\_\_

Which semester are you applying for? (Please circle all that apply)    Fall    Spring    Summer

Which areas are you interested in working? (Please circle all that apply)    Archives    Library    Event Planning  
Clerical Work    Education Department

Skills and Qualifications: \_\_\_\_\_  
\_\_\_\_\_

Why are you interested in an internship at the Virginia Holocaust Museum? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_