



2017 SUMMER ARTCAMP INTERNSHIP APPLICATION FORM

Full name: _____

School Attending: _____ Age: _____

Current address: _____

City / State / Zip: _____

Telephone number: _____ Email address: _____

Parent/Guardian Name (If under 18): _____

Parent/Guardian Telephone: _____

Please indicate which camp(s) you are available to work:

Camp One: June 6 - 15	AM	PM	All Day
Camp Two: June 20 - 29	AM	PM	All Day
Camp Three: July 11 - 20	AM	PM	All Day
Camp Four: July 25 - August. 3	AM	PM	All Day
Camp Five: August 8 - 17	AM	PM	All Day

The Sioux City Art Center gives college students and aspiring professionals the opportunity to experience working in a fast paced, arts environment. We do not offer paid internship positions. However, we do complete the necessary requirements for students to receive credit toward their degree. We will also consider individuals looking for an experiential learning opportunity who may not be seeking college credit. Pursuing an internship at The Sioux City Art Center is recommended for students interested in working in arts administration, art education, galleries, museums, schools, and other arts institutions.

Sioux City Art Center Intern Agreement

I understand that the SCAC reserves the right to periodically evaluate and terminate intern services should my responsibilities not be fulfilled to satisfaction. If for any reason I am unable to attend my scheduled internship days, I must contact the Art Center immediately.

Please submit the following materials as part of your application package.

ATTACHMENTS

Resume: Attach a resume in which you list relevant coursework, work experience, and other experience that relate to the internship for which you are applying.

Personal Statement: On a separate sheet of paper, please write a short proposal stating why an internship at the Sioux City Art Center, and the specific internship project for which you are applying, relate to your academic and career goals. Please keep statements to one page or less.

Letter of Recommendation: Provide one letter of recommendation from a current or former professor, employer, or personal reference. Indicate in this application if the letter is included or will be sent separately.

PLEASE RETURN ALL COMPLETED APPLICATIONS AND ATTACHMENTS VIA MAIL, EMAIL OR FAX TO:

Education Department
ATTN: Summer Internship Program
Sioux City Art Center
225 Nebraska Street
Sioux City, Iowa 51101
Email: dmarqusee@sioux-city.org
Phone: 712-279-6272 ext. 201
Fax: 404-712-255-2921