



# History Center of Olmsted County Intern Application

1195 West Circle Drive SW; Rochester, MN 55902  
507-282-9447  
ochs@olmstedhistory.com

02/2013

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Cell Ph. \_\_\_\_\_

Best time to reach you \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Availability: Start date \_\_\_\_\_ End date \_\_\_\_\_ .

How many hours do you need to complete your internship requirement? \_\_\_\_\_

Preferred Hours (Mark all that apply)

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning 9:00 – 12:00					
Afternoon 1:00 – 5:00					

Need flexible schedule \_\_\_\_\_ (**Other Hours available by arrangement.**)

Name of school: \_\_\_\_\_

Grade level \_\_\_\_\_

Field of Study or Degree: \_\_\_\_\_

Previous Volunteer Experience \_\_\_\_\_

Please share any physical limitations that may influence your activities here.

How did you learn of the intern opportunities at HCOC? \_\_\_\_\_

Please list the name of two personal references and their phone numbers.

1. \_\_\_\_\_ 2. \_\_\_\_\_

I certify that the statements made in this application are true and have been given voluntarily. I also understand that I will not be paid for my services as an intern.

Your Signature \_\_\_\_\_ Date \_\_\_\_\_