



Human Resources

Museum of Science

1 Science Park
Boston, MA 02114-1099

Confidential Application for Internship

Fax 617-589-0362
mos.org

Internship Coordinator 617-589-0314
An Equal Opportunity Employer. M/F/D/V.

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, disability, sexual orientation, marital or veteran status, ancestry, genetic information, military service and any other category protected under applicable federal, state or local law. The Museum of Science does not discriminate against any individual on the basis of disability, who chooses to participate in any programs, service, venue or activity.

Please print clearly and complete all sections.

Date Email Address

Name First Middle Last

Current Address Number Street Apartment

City State Zip

Current Telephone (cell)

Permanent Address Number Street Apartment

City State Zip

School/College Year

City State Country

Please list the intership(s) for which you are applying.

Internship Title

Table with 2 columns: Days Available, Times Available. Rows for Monday through Sunday.

Is this internship for academic credit? If so, how many hours are needed to fulfill your internship requirements?

How were you referred to the Museum of Science?

- Museum of Science website
Other website
School/Career Services (specify school)
Current Museum staff, intern, or volunteer
Other (please specify)

Yes **No**

- Have you ever applied to a position at the Museum?
If yes, state when and for what position. _____
- Have you ever worked for the Museum?
If yes, state what position held, type of employment (regular, summer/seasonal, temporary, intern, other)
and dates of employment. _____
- Do you have any relatives employed by the Museum?
If yes, name(s) of relative(s) _____
- Upon request, can you furnish proof of United States citizenship or eligibility to work in the United States?
- If hired and under 18 years of age, can you furnish a work permit?

Education

High School

_____ Name _____ Address _____
Number of years attended _____ Did you graduate? Yes No

Vocational & Trade School

_____ Name _____ Address _____
Number of years attended _____ Did you graduate? Yes No Degree received _____

College

_____ Name _____ Address _____
Number of years attended _____ Did you graduate? Yes No Degree received _____

Graduate School

_____ Name _____ Address _____
Number of years attended _____ Did you graduate? Yes No Degree received _____

Other

_____ Name _____ Address _____
Number of years attended _____ Did you graduate? Yes No Degree received _____

Military Service

Total months of active duty _____ Branch of US military service _____ Last rank or grade _____

Duties, special skills, courses _____ Reserve status _____

Skills

Computer skills _____

Professional References

_____ Name _____ Company name _____ Address _____ Telephone _____

_____ Years acquainted _____ How known? _____

_____ Name _____ Company name _____ Address _____ Telephone _____

_____ Years acquainted _____ How known? _____

_____ Name _____ Company name _____ Address _____ Telephone _____

_____ Years acquainted _____ How known? _____

Employment History

List all employment including self-employment, internships, summer, part-time, and volunteer work.

Begin with your most recent employment.

Name of employer _____ Your title _____
Address _____ Responsibilities _____

Supervisor's name _____ To _____
Telephone () _____ Mo. ____ Yr.
Reason for leaving _____
 Full-time
 Part-time
 Volunteer

Name of employer _____ Your title _____
Address _____ Responsibilities _____

Supervisor's name _____ To _____
Telephone () _____ Mo. ____ Yr.
Reason for leaving _____
 Full-time
 Part-time
 Volunteer

Name of employer _____ Your title _____
Address _____ Responsibilities _____

Supervisor's name _____ To _____
Telephone () _____ Mo. ____ Yr.
Reason for leaving _____
 Full-time
 Part-time
 Volunteer

Name of employer _____ Your title _____
Address _____ Responsibilities _____

Supervisor's name _____ To _____
Telephone () _____ Mo. ____ Yr.
Reason for leaving _____
 Full-time
 Part-time
 Volunteer

Please account for any gaps in your employment history.

Have you ever been discharged from employment, suspended, or asked to resign?

Yes No If yes, please explain. _____

Miscellaneous

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liabilities.

If you accept employment with the Museum, federal law requires you to produce documents establishing your identity and work authorization. The Museum cannot legally hire you if you do not produce such verification.

Applicant Certification

Please read carefully before signing. If you have questions, please direct them to an employment representative.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I become employed by the Museum, falsified statements or omissions on this application shall be grounds for immediate dismissal.

I authorize investigation of all statements and/or omissions contained herein and the references listed to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing information to you.

I understand that I may be required to sign a confidentiality and/or business ethics agreement in connection with any employment with the Museum.

I understand that if I become employed by the Museum, I will be an at-will employee. Accordingly, the employment relationship may be terminated, with or without cause, and with or without notice, at any time, at the option of either the Museum or myself. I further understand that no supervisor or manager or representative of the Museum has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

This application will be given due consideration, but I understand that its submission does not imply that I will be offered employment. I also understand that any offer of employment by the Museum of Science must be extended in writing to be considered valid.

My signature certifies that I have read and agree with the above statements.

Signature _____ Date _____

Check if resume is included.