

# MOSH Teen Intern Program Application + General Transportation Parent Release Form

MAIL COMPLETED FORM TO:  
Museum of Science & History  
1025 Museum Circle  
Jacksonville, FL 32207

FAX COMPLETED FORM TO:  
904.396.7025

Your Name: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_ GPA: \_\_\_\_\_  
List of activities, hobbies, jobs, and past experiences: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Returning intern? (*circle one*)      YES      NO      If yes, how many years have you interned at MOSH: \_\_\_\_\_

**DEADLINE FOR  
APPLICATION:  
APRIL 9, 2012**

### Choose 3 areas of interest at MOSH (1st, 2nd, & 3rd choices)

Camps (*Pre K*): \_\_\_\_\_ Camps (*K - 5th*): \_\_\_\_\_ Guest Relations: \_\_\_\_\_ Natural Sciences: \_\_\_\_\_  
Demonstrations: \_\_\_\_\_ Planetarium (*returning interns only*): \_\_\_\_\_

### Parent/Guardian/Emergency Contact Information

Full Name: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_

**For the applicant:** If I am accepted into the MOSH Teen Intern Program, I agree to abide by all rules and policies of the museum and of the program including the dress code, attendance policy, and behavior policy. I understand that my training and attendance are vital to the success of the program. I agree that I will complete at least 75 community service hours at MOSH.

Signature (*applicant*): \_\_\_\_\_ Date: \_\_\_\_\_

### General Transportation Parent Release

**For the parent/guardian:** I understand the importance of the MOSH Teen Intern experience for my teen and support him/her in this commitment. If he/she is chosen to participate, I will do all I can to facilitate his/her attendance and compliance with MOSH policies.

I/We give consent to \_\_\_\_\_ (applicant) riding with staff or other interns to and from the museum as deemed convenient or necessary. I/We take responsibility for the decisions made by \_\_\_\_\_ (applicant) and understand it is his/her responsibility to notify me/us if such transportation is planned.

I/We agree to release and discharge the Museum of Science & History of Jacksonville, its officers, agents, and employees, exercising reasonable care with the scope of employment, from the liability growing out of personal injury and property damage resulting from or occurring during the aforementioned activity.

Signature (*parent/guardian*): \_\_\_\_\_ Date: \_\_\_\_\_



### NEW INTERN APPLICANT: **DON'T FORGET TO INCLUDE WITH THIS APPLICATION**

- Personal Essay (typed one page essay explaining why you would be a great intern)
- Two Letters of recommendation (one from a teacher and one from an adult friend or teacher)

**NO NEW APPLICANT WILL BE ACCEPTED WITHOUT ALL OF THE ABOVE INFORMATION.**

## Teacher/Personal Recommendation for MOSH Teen Intern Program

Applicant's Name \_\_\_\_\_

Has applied for a position in the Teen Internship Program at the Museum of Science & History. Participants in the program are involved in all areas of MOSH. They develop new skills and confidence while providing valuable volunteer services to MOSH. Please complete this reference form and return it to the applicant. Thank you for your support of this student's commitment to community service.

How long have you known the applicant? \_\_\_\_\_

Sincerely,  
Volunteer Manager

*Please shade in an applicable "grade".*

1. General Scholarship (grades, work habits, turns in work on time):  
 A  B  C  D  F
2. Attitude:  
 A  B  C  D  F
3. Reliability/ability to complete tasks without supervision:  
 A  B  C  D  F
4. He/she works well with others:  
 A  B  C  D  F
5. He/she is a responsible person:  
 A  B  C  D  F
6. Speaking ability (able to speak to large groups):  
 A  B  C  D  F

Additional Comments (please use back of page if needed):

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Signature \_\_\_\_\_

Date \_\_\_\_\_

Name (please print) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

## Teacher/Personal Recommendation for MOSH Teen Intern Program

Applicant's Name \_\_\_\_\_

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Additional Comments (please use back of page if needed):

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Signature \_\_\_\_\_

Date \_\_\_\_\_

Name (please print) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_