

Aspen Art Museum
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Art Educators in Training Internship Application

Name: _____ Grade/Age: _____

Parent or Guardian's name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

High School Currently Attending: _____

Workshops of Interest (in order of preference):

1. _____

2. _____

3. _____

4. _____

5. _____

Please list all relevant arts, work, or childcare experience:

Additional Materials: Please include an essay (no longer than 500 words) that expresses your interests in art education and your approach to leadership.

References (please include telephone number and relationship to reference):

1. _____

2. _____

Please email application and essay to education@aspenartmuseum.org or mail to Aspen Art Museum, 637 East Hyman Avenue, Aspen, CO 81611