

**Rutgers University
Department of Art History
Historic Preservation Certificate Program**

Internship Application – Undergraduate/Graduate

Fall Spring Course No.: _____

Student's Name: _____

Student ID#: _____

College: _____ Class of _____

Email Address: _____

Internship Information:

Name of Institution: _____

Mailing Address: _____

Telephone Number: _____

Fax Number: _____

Email Address: _____

Name of Contact: _____

Title: _____

Nature of work: _____

Program Director's approval: _____

Date: _____