



Neville Public Museum Of Brown County

210 Museum Place • Green Bay, WI 54303

Phone 920/448-4460 • FAX 920/448-4458

APPLICATION FOR INTERNSHIP

(Please Print)

Position Desired :	Date:
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Full Name:

Address :

Street	City	State	Zip
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Phone:	E-mail:
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Education	Name	Year	Major	Degree
High School				
College/University				
Special Studies				
Special Training & Skills				

Employment	
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Employer	Address
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Date of Employment	From:	To:	Salary
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Position Held & Brief Description:

Reason for leaving:

Employment	
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Employer	Address
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Date of Employment	From:	To:	Salary
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Position Held & Brief Description:

Reason for leaving:

Please give the names of three people (not related to you) who know you and your work abilities.

Name	Address	Phone	Occupation
1.			
2.			
3.			

Signature _____	Date _____
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NEVILLE PUBLIC MUSEUM OF BROWN COUNTY RECORD CHECK

To be completed by persons 18 years of age and over who would like to volunteer at the museum

Police check release

Having made application with the Neville Public Museum of Brown County and desiring it to be informed as to my previous record and character, I hereby authorize the Museum to investigate my past record and character, whether this information is of public record or not. I hereby authorize the Green Bay, Wisconsin, Police Department and any other police departments listed below to check all of my records and complete this form to be returned to the Neville Public Museum of Brown County. Further, I hereby release my past and present employers, references, law enforcement representatives and all persons whom-so-ever from any damage caused by furnishing said information.

Please Print or Type (Following to be completed by applicant)

Full Given Name			
First	Middle (Not initial)	Last	Maiden
Address			
Number/Street	City, Town, Village	Zip Code	Telephone
Date of Birth		Social Security Number	
Driver License Number			
List <u>all convictions</u> in the space provided below. Include ordinance and criminal offenses, etc. Be sure to state date and location of offense. Use reverse side if more space is needed. (Please include traffic violations.)			
Police Department in the town/village/city of <i>(list location at which you last resided for period of not less than 2 years)</i>			

I understand that falsification of this application is reason for rejection.

Applicant's Signature _____

Date _____

Museum Representative's Signature _____

Date _____

<i>To be completed by Police Department</i>	<input checked="" type="checkbox"/> One
The information in this application is consistent with police records	<input type="checkbox"/>
The information in this application is not consistent with police records	<input type="checkbox"/>
If possible, please explain:	
Police Department Representative's Signature _____	Date _____
Return to: Neville Public Museum of Brown County 210 Museum Place •Green Bay, WI 54303	