

Fine Arts Painting Internship Application Form

Personal Information

First Name

Last Name

Email

Phone

Address

Education

School / University

Degree

Year of Graduation

Major

Portfolio

Portfolio Link

Describe your experience in painting

Why do you want this internship?

Availability

Available Start Date

Preferred Duration (Months)

Hours per Week

References

Reference Name

Reference Contact



I certify that the above information is true.