

# 2008 Academic Internship Application



Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current Address: \_\_\_\_\_

Current Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Permanent Address (if different from above):  
\_\_\_\_\_

Current Phone (if different than above):

(\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Current school attended: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

School Address: \_\_\_\_\_

Advisor's Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Advisor's E-Mail: \_\_\_\_\_

Major: \_\_\_\_\_

Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you currently a student?  yes  no

Do you have a driver's license?  yes  no

Will you be receiving academic credit for this internship?  yes  no

Do you have a car with you during your internship?  yes  no

## INTERNSHIP SELECTION

Please choose from the following internships: Properties, Wardrobe, Electrics, Scenic Construction, Scenic Painting, Marketing/PR, Fundraising/Development, Administration, Education, Company Management, Stage Management, Artistic, Production Management.

1st choice: \_\_\_\_\_

Earliest Date Available: \_\_\_\_/\_\_\_\_/\_\_\_\_

2nd choice: \_\_\_\_\_

Final Date Available: \_\_\_\_/\_\_\_\_/\_\_\_\_

## LETTERS OF RECOMMENDATION

Please list the names, addresses phone numbers and e-mail addresses of the two people submitting letters of recommendation:

1. \_\_\_\_\_ 2. \_\_\_\_\_

## ADDITIONAL REQUIREMENTS

1. Resume of theatre and related experience.
2. Two letters of recommendation from faculty or people familiar with your work.
3. A brief personal statement about what your expectations are and why you are applying for an internship.

**For more information, please contact:** Debra Baron, Director of Education  
Westport Country Playhouse ▪ 25 Powers Court ▪ Westport, CT 06880  
tel: 203.227.5137 x116 ▪ Fax: 203.221.7482 ▪ e-mail: dbaron@westportplayhouse.org

*Please provide us with any additional information which you feel may help us in evaluating your application into this program.*

2008 Summer Internship Program Application

**Deadline: April 20, 2008**



Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current Address: \_\_\_\_\_

Current Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Permanent Address (if different from above):  
\_\_\_\_\_

Current Phone (if different than above):  
(\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Current school attended: \_\_\_\_\_

Faculty Advisor: \_\_\_\_\_

School Address: \_\_\_\_\_

Advisor's Phone: (\_\_\_\_) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Advisor's E-Mail: \_\_\_\_\_

Major: \_\_\_\_\_

Graduation Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you currently a student?       yes     no

Do you have a driver's license?     yes     no

Will you be receiving academic credit?  
for this internship?       yes     no

Do you have a car with you  
during your internship?       yes     no

**INTERNSHIP SELECTION**

Please choose from the following internships: Properties, Wardrobe, Electrics, Scenic Construction, Scenic Painting, Marketing/PR, Fundraising/Development, Administration, Education, Company Management, Stage Management, Artistic, Production Management.

1st choice: \_\_\_\_\_

Earliest Date Available: \_\_\_\_/\_\_\_\_/\_\_\_\_

2nd choice: \_\_\_\_\_

Final Date Available: \_\_\_\_/\_\_\_\_/\_\_\_\_

**LETTERS OF RECOMMENDATION**

Please list the names, addresses phone numbers and e-mail addresses of the two people submitting letters of recommendation:

1. \_\_\_\_\_ 2. \_\_\_\_\_

**ADDITIONAL REQUIREMENTS**

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