

Internships are offered to enrolled university students in the process of obtaining a studio art, art history, or other fine art-related degree. Selection is based upon scholastic achievement, experiences, interests, and future career goals.

Students who wish to apply for this position must submit the Internship Application along with a current resume.

**APPLICATION DEADLINES AND DATES**

**Summer:** Internship begins May 18, Ends August 6  
Applications accepted no later than **April 10**.

**Fall:** Internship begins September 2, Ends December 10  
Applications accepted no later than **August 6**.

**Spring:** Internship begins January 18, Ends April 29  
Applications accepted no later than **December 3**.

Prior work experience in an art-related field is not required. This unpaid internship is a part time position and hours will be determined upon selection. Interviews will be granted on a first come, first served basis, so please apply promptly. Should you have any questions about this internship or the application procedure, please contact the Educational Programmer, Lindsey Walls.

Please mail, fax, or email completed applications to:

The Goss-Michael Foundation  
Att: Lindsey Walls  
1405 Turtle Creek Blvd  
Dallas, TX 75207

T: 214 696 0555  
F: 214 696 0556  
Lindsey@gossmichaelfoundation.org

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  Male  Female  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Address, if different: \_\_\_\_\_  
I have read and fully understood all of the requirements of this internship.  
\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**ACADEMIC INFORMATION**

College or University of current enrollment: \_\_\_\_\_  
Major/Minor: \_\_\_\_\_ Current GPA \_\_\_\_\_  
Year of current enrollment: \_\_\_\_\_  
Professor that can be contacted for reference: \_\_\_\_\_  
Direct Phone or Email: \_\_\_\_\_

Please write a brief statement explaining your interest in interning for The Goss-Michael Foundation. How will this experience fit into your current art practice, studies or plans for the future? (A separate sheet may be attached if needed.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For Office Use Only  
DE: \_\_\_\_\_  
IV Date: \_\_\_\_\_

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