



Kate McCaffrey
Director
8686 Knowledge Ln.
Cicero, NY 13039
kmccaffrey@nopl.org

Date: _____

Internship Application

Name (First, Last) _____

Email _____ **Phone** _____

University _____ **Degree/Major** _____

Expected Date of Graduation _____ **Required Internship Hours** _____

Length of internship sought _____ **Desired start/end date** _____

Availability (times/days of week) _____ **Desired Internship title/project** _____

Please describe relevant skills and qualifications for this internship _____

REQUIRED QUESTIONS

1. Please share why you are interested in this particular internship. Why our library? Why this position? What do you find intriguing? What do you hope to learn or experience? _____

2. Please describe the skills and expertise you would bring to this internship with the NOPL. Share examples of similar or related projects or tasks you have completed in the past, including what was positive and what was challenging about the experience. _____

3. If this internship will help to complete school, college, or university requirements, please answer the following question, or attach any relevant paperwork provided by the institution. Explain the type of activities or projects required for your program, including the level of mentoring or supervision required, and any other relevant information that will best help us determine if this is an internship experience we can reasonably provide. _____
