

Internship Application:

Date:	Applicant Name:	
Phone:		Email:
Current School A	ffiliation:	
Area of Study:		Degree Expected:
objectives, skills,	and benefits of the internshi	
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Requested Dates	of Internship:	to
Desired Weekly S Please note LEAF's C of those hours.		d Fri 9-2, though we have many events and functions outside
Monday:		
Tuesday:		
Wednesday:		
Thursday:		
Friday:		

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I understand that, should I be accepted as an intern at LEAF Global Arts, the following conditions will apply:

- a) Status: Although not considered a LEAF staff member, I shall abide by all LEAF policies and procedures.
- b) Financial Support: I shall not be paid by LEAF and must make my own arrangements for living expenses. Travel costs to and from LEAF and living accommodation are also my own responsibility.
- c) Confidentiality and Publication of Information: As an intern, I will respect the confidentiality of information that I collect or am exposed to at LEAF Global Arts.
- d) Employment Prospects: The LEAF Internship Programme is not connected with employment and there is no expectancy of such. Interns may apply for any open LEAF at the end of their internship.

Applicant Signature	 Date	