

Please fill out the information below and attach your personal essay and letters of recommendation. You may bring your completed application to Muse Knoxville in person OR you can email it to corey@themuseknoxville.org OR you are welcome to mail it to

Muse Knoxville

ATTN: Corey Hodge

516 N Beaman Street

Knoxville, TN 37914

You are welcome to pick up a physical copy of this application from Muse Knoxville in person so you do not have to pay to have it printed.

Please Print		
Date		
Name		
Birthdate// (Please note, participants r	must be in at le	ast 7th grade for the 2021-2022
school year)		
Address		
City, State & Zip		
Email		
Phone		
May we text you with updates and information ab	out your volunte	eer/work shifts?
School/College		
Grade Level/Post-secondary (2021-2022)		
Parent/Guardian (if under 18)		
E-Mail	Phone	
Please list any allergies, medical conditions, or acc	ommodations:	
Have you volunteered with us before?		
If yes, in what year and capacity?		
How did you hear about our volunteer program?		
□ Muse Knoxville Website □ Museum Visit	🗆 School	□ Friend/Family
Other (Please specify)		



List your previous volunteer experiences, if any.

List any extracurricular activities in which you are involved or any interests you have:

Pathway Preference

Place a check mark next to any of these areas you would be interested in for your focus pathway for this program year:

□ Marketing & Research: Using data analytics to support our various grant-based programs and services as well as helping Muse increase brand awareness.

□ **Business**: General business connected to budgeting, finance, and accounting, project management, strategic planning, etc.

□ **Education**: Focus on students interested in following an educator track in one of the following areas: Special Education, Early Childhood, STEAM (Science, Technology, Engineering, Art & Mathematics)

□ **STEAM**: Focus on students interested in pursuing a STEAM (Science, Technology, Engineering, Art & Mathematics) career profession to help them develop soft skills and content awareness.

Required Trainings

We expect some participants might need to miss or reschedule training sessions for any given reason. Because orientation and other required training are so vital to your development as a MAPologist, it is important to attend them. However, we will offer you flexibility in the event that you cannot attend: you may **reschedule** up to two required sessions, and you may **miss** only one session in order to complete the apprenticeship successfully.

It is your responsibility to notify Corey Hodge, the Belonging Manager, when conflicts arise in your schedule. Please check the attached training schedules for specific times and dates.



The deadline to apply for the 2021-2022 Muse Apprenticeship Program cohort is Tuesday, August 31, 2021.

We will review each application as they come in and notify you if you are accepted or not by Tuesday, September 7, 2021.

Your application must be submitted along with TWO (2) letters of recommendation. These letters may be written by teachers, school officials, coaches, volunteer or work supervisors, or community leaders. Applications are not considered complete until we receive these letters. If accepted into MAP, MAPologists are expected to attend an orientation training, and we will contact you with dates and times for orientation.

In addition to your letters of recommendation, address these prompts (typed or hand-written): What makes you an ideal MAPologist? How will this position aid your personal development? What about STEAM (Science, Technology, Engineering, Art, and Mathematics) excites you?

Student & Guardian Agreement

I, ______, agree to commit to participate in MAP and work my required hours each month throughout the 2021-2022 MAP year. I agree to attend orientation in September and other training sessions when scheduled and arrive on time for my shifts, except in unforeseen circumstances. I also agree to follow the rules and procedures of Muse Knoxville and to follow instructions from my supervisors and/or mentors. I understand that if I fail to meet these requirements, I may not be eligible for continued involvement with the program.

Signature of Student

Date

If MAP participant is under age 18:

As a parent or guardian, I understand that my child needs my consent and involvement to be a productive participant. I will do my best to ensure that my child meets all the requirements of the position including regular attendance and adherence to Museum policies and procedures. I give permission for my child to participate in all program-sponsored activities including program orientations, small group discussions, and social outings.

Signature of Parent/Guardian

Date

Office Use (Only:	
Date Recei	ved:	
LoR#1	LoR#2	
Personal Ess	ay:	
Notified Ap	plicant	