STATE BANK OF PAKISTAN
M U S E U M

State Bank Museum, Archives & Art Gallery Deptartment Internship Program

(RIGISTRATION)

1- General Information

Family Name | First / Given Name | Gender (M/F)

D.O.B (Day / Month / Year) | Place of Birth | Present Nationality

Date available for internship. From: _____ To: _____

Are you interested in a part-time internship/fulltime? A: Part time ☐ B: Fulltimr ☐

If Part time, how many hours and days of a week? _____ | _____

What are your preferred areas of interest? _____

_____

What are your objectives in undertaking an internship with State Bank Museum, Archives & Art Gallery? _____

_____

_____

_____

_____

Languages - Mother tongue: _____

Language Competence: (specify)	Read Easily/Not Easily	Write Easily/Not Easily	Speak Easily/Not Easily	Understand Easily/Not Easily

Select one (or up to five) area(s)

2- Educational Information

Higher Education (College and/or University, or equivalent)

Institition (Name, Place, Country)	Month/Year Attended	Degrees Obtained	Major Subjects of Study

Degree(s) Expected:

3- Work Experience

Career Plans:

4- Skills & Talents

Please indicate any skills you possess or describe the talents you have

Please describe any previous internships experience you may have had.

4.1 Is there any particular purpose for closing the internship

Reference: Indicate the name of your adviser or the Dean of the Faculty who can recommend you for the internship and describe your character and qualifications.

Full Name	Full Address	Business or Occupation

Your Address:

Telephone No. _____ E-mail Adress: _____

In case of emergency notify: (Name): _____

Adress / Telephone: _____

I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief.

Note: Download and submit the filled form at: tanveer.afzal@sbp.org.pk

_____ _____

Signature Signature

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M U S E U M
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