

**OFFICE OF SENATOR TOM CARPER  
INTERNSHIP APPLICATION**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Address (until \_\_\_/\_\_\_/\_\_\_): \_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Academic Email Address: \_\_\_\_\_

Permanent Email Address: \_\_\_\_\_

Parent(s)' or Guardian(s)' Names: \_\_\_\_\_

Parent(s)' or Guardian(s)' Address(es): \_\_\_\_\_

Parent(s)' or Guardian(s)' Phone: \_\_\_\_\_ or \_\_\_\_\_

**INTERNSHIP PREFERENCES**

Session of interest (circle one):

Spring Semester

Summer Session

Fall Semester

Office Preference (circle one):

Dover, DE

Georgetown, DE

Wilmington, DE

Washington, DC

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Are you applying to any other Senate office internships this semester?    Yes    No

**AVAILABILITY**

Please indicate the days and times you are available:

From: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ M T W Th F \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm

**SCHOOL INFORMATION**

College or University: \_\_\_\_\_

Year (circle one):

Fr

So

Jr

Sr

Graduate Student

Major/Minor: \_\_\_\_\_ GPA: \_\_\_\_\_ out of \_\_\_\_\_

**RÉSUMÉ INFORMATION**

Please submit a resume with your application. In the space below, or on a separate sheet of paper, select two things you would most like us to see from your résumé, describe them in greater detail, and explain why they make you a strong candidate for our internship program.

- 1) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 2) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ADDITIONAL MATERIALS**

**In addition to this application form and your resume, please also submit a cover letter, two letters of recommendation, and a writing sample.** Your writing sample can be an assignment or publication you worked on for school, another internship or job. Your writing sample should not exceed 1,000 words.

**WORK ELIGIBILITY**

Are you legally authorized by the United States to be in the United States during the period of your internship? Yes\_\_\_\_ No\_\_\_\_

**CERTIFICATION**

I certify that all of the information I have supplied on this application is true, correct, complete and made in good faith. I understand that a false or fraudulent answer to any question or item on any part of this application, or the withholding or omission of any information requested on this application, may be grounds for not considering me for an internship, or for terminating my internship after it begins, and may be punishable by fine or imprisonment (U.S. Code, Title 18 Sec. 1001).

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**