

**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 (check one):

Spring Session

Summer Session

Fall Session

Office Preference (check one):

Dover, DE

Georgetown, DE

Wilmington, DE

Washington, DC

Second Choice (if applicable): _____

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 (check one):

Fr

So

Jr

Sr

Graduate Student

Post-Graduate

Major/Minor: _____ GPA: _____ out of _____

RÉSUMÉ INFORMATION

Please submit a resume with your application. In the space below, 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) _____

DELAWARE CONNECTION

Please explain your connection to or interest in the state of Delaware:

ADDITIONAL MATERIALS

In addition to this application form and your resume, please also submit a cover letter, a letter of recommendation, and a writing sample (500 word max). Your writing sample can be an assignment or publication you worked on for school, another internship or job.

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