OFFICE OF SENATOR ELIZABETH DOLE

INTERNSHIP APPLICATION FORM (PLEASE PRINT OR TYPE)

Office Applying for: (Check One) Wash	nington, D.C.	Raleigh Salisbury	Greenville Hendersonville	
Session Applying for: (Check	One)	Fall F	Spring Summer I	Summer II	
Session Dates:			(Listed on Senator Do	ole's website)	
Full Name:			_ Today's Date:		
Date of Birth:					
Name of School			Home Address		
Address					
City	State	Zip Code	City	State Zip Code	
School Phone	_		Home Phone		
Cell Phone	-	Email Addre	ess		
Citizenship: Are you a citizen o	of the Unit	ed States? (Ch	neck One)	ГNo	
If no, what type of visa do y	ou hold?		From what country?	?	
Are you a registered voter? (Ch	eck One)	Yes	$\Gamma_{ m No}$		
Do you live in North Carolina?	(Check O	one) Γ_Y	es Γ_{No}		
Availability:					
I understand that I am applying	for an unj	paid internship	o. I will be available to w	vork hours per week.	
I am available Full-Time:					
I am available Part-Time:	_ at the fo	ollowing times	5:		
Monday Tuesday		Wednesda	y Thursday	Friday	

School currently attending:
Year in School AS OF TODAY: (Check One) Freshman Sophomore Junior Senio
Major: Minor:
G.P.A
Advisor's Name and Telephone Number:
Will you be earning College Credit for your Internship? (Check One) Yes No
Note: Awarding academic credit is at the discretion of your academic institution.
Arrangements for credit should be made prior to beginning the internship.
Honors and Activities:
Previous Work Experience:
On a separate sheet of paper, please complete each of the following essay questions, in 350 words or less:
1. How did you become interested in public service?
2. Why do you wish to intern in the Office of Senator Dole?
3. What do you hope to accomplish during your internship?
Signature Date signed

I certify, to the best of my knowledge and belief that the information contained herein and attached to this application, is accurate, true, and complete. I understand that false or fraudulent information on or attached to this application may be grounds for not considering my application, or terminating my internship after it begins.

Please remember to attach all required materials (current resume, cover letter, three completed essay questions, two letters of recommendation, and a copy of your unofficial transcript). Your packet must be complete in order to be considered for an Internship with Senator Dole.

Thank you for your interest in serving in the Office of Senator Elizabeth Dole. If you have any questions please contact James Kraehenbuehl at 202-224-6342.

Application Process

To be considered for an internship, your Application Packet must include all items listed below. It is very important to provide complete and accurate information so we may fully evaluate your qualifications.

Your Application Packet must include the following:

 Internship Application Form
 Current Resume
 Cover letter indicating the applicant's primary area of interest (i.e. public policy, media, administrative support)
 Completed essay questions (3)
 Letters of recommendation (2) (Non-family members; photocopies are fine)
Transcript (photocopy is fine)

Required interviews for candidates will be scheduled by the intern coordinator in each office. The interviews will be conducted over the phone or in person, depending on location and scheduling.