

**CONGRESSWOMAN ILEANA ROS-LEHTINEN**  
INTERN & VOLUNTEER APPLICATION

NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE \_\_\_\_\_ OFFICE PHONE \_\_\_\_\_ BEEPER \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

PARENTS' NAME AND ADDRESS \_\_\_\_\_  
\_\_\_\_\_

COLLEGE/ SCHOOL CURRENTLY ATTENDING \_\_\_\_\_

COLLEGE/ SCHOOL PHONE \_\_\_\_\_

CLASSIFICATION (SOPHOMORE, ETC.) \_\_\_\_\_ G.P.A. \_\_\_\_\_

MAJOR/ MINOR IF, APPLICABLE \_\_\_\_\_

LANGUAGE(S) \_\_\_\_\_

SKILLS \_\_\_\_\_

PLEASE ATTACH A RESUME THAT INCLUDES EMPLOYMENT EXPERIENCE AND  
EXTRA-CURRICULAR ACTIVITIES.

I AM AVAILABLE: INTERN OR VOLUNTEER?

DATE: FROM \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ TO \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

FULL-TIME/ PART-TIME \_\_\_\_\_ HOW MANY HOURS PER WEEK? \_\_\_\_\_

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM PM	AM PM	AM PM	AM PM	AM PM
: - :	: - :	: - :	: - :	: - :

ARE YOU TAKING THIS FOR CREDIT? \_\_\_\_\_ HOW MANY CREDITS? \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_