

WASHINGTON, D.C. 20510

APPLICATION FOR INTERNSHIP SENATOR JOE LIEBERMAN (ID-CT)

TYPE OR PRINT LEGIBLY

NAME: First:	Middle		Last			
DOB: (YYYYMMDD)	Email Address:					
Home Address	Street:					
Telephone:	City	County		State	Zip	
School/Mailing Address	Street:					
Telephone:	City	County		State	Zip	
COLLEGE: Name/Class		MAJOR/MINOR:				
Are you a registered voter?: Circle one	yes no	no If so, in what municipality			· ·	
PLEASE CHECK PREFERENCES:						
LOCATION	Connecticut		Washington			
PROGRAM:	Fall (Sept. – Dec)		Fall (Sept. – Dec)			
	Spring (Jan – May)		Spring (Jan – May)			
	Summer, CT (late May – mid August)		Summer, DC (Either Session)			
			Sumi	Summer I, DC (June - July)		
			Sum	Summer II, DC (July - August)		
SUMMER APPLICANTS: Please note: There is only one summer session for the Connecticut office. Are you able to start before Memorial Day and/or continue working until late August? If so, please indicate dates.					DEADLINES : Washington – Mar 17 Connecticut – Apr 15	
FALL & SPRING APPLICANTS: Please fill in your preferred dates to begin and complete your internship.					DEADLINES : Applications accepted on a rolling basis	

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ALL APPLICANTS:					
I understand I am applying for an unpaid internship. I will be available to work full time – 40 hours per week. If not, please specify availability:					
What mode of transportation will you be using to travel between your home and our office? **Please note – the office is unable to provide parking facilities for interns.					
If you will NOT be traveling via personal vehicle, will public transportation allow you to begin and end your work day at the hours you have listed above? yes no					
Will you be receiving academic credit for the internship? yes no					

STATEMENT AND RESUME:

How did you hear about our internship program?

Please attach a short (500 words) **statement** about your expectations of an internship program, and your goals for your participation in the program, along with a **personal resume**.

FINISHED WITH YOUR APPLICATION? PLEASE SIGN BELOW AND FAX TO THE APPROPRIATE OFFICE.

The Honorable Joseph I. Lieberman One Constitution Plaza, 7th Floor Hartford, CT 06103 Fax: (860) 549-8478

ATTN: Intern Program Coordinator

-- or --

The Honorable Joseph I. Lieberman United States Senate 706 Hart Senate Office Building Washington, D.C. 20510 Fax: (202) 224-9750

ATTN: Intern Program Coordinator

SIGNATURE:	Date: