

# **Internship Opportunities**

*with*

## **Kent Conrad**

### **United States Senator**

### **North Dakota**



**“We are looking for talented men and women who are interested in government and public service. Our interns get an up-close look at the way the federal government operates. It’s a great experience, and I’m glad we can offer it to deserving students.”**

## INTERNSHIP APPLICATION FORM FOR THE OFFICE OF SENATOR KENT CONRAD

Thank you for taking the time to apply for an internship with the Office of Senator Kent Conrad. Please return this application form, a letter of application, resume, current school transcript, and three letters of reference to: **Senator Kent Conrad, 657 2nd Ave. N, Room 306, Fargo, ND 58102.** For further information, contact the Intern Coordinator at 701-232-8030.

It is important that all information you provide on this application is complete and accurate. Your failure to give complete, accurate answers could be grounds for not selecting you for an internship or for terminating your internship after you begin.

### GENERAL INFORMATION

1. Name: \_\_\_\_\_  

Last
First
Middle
2. Current Address: \_\_\_\_\_
3. Personal Telephone: \_\_\_\_\_
4. Email Address: \_\_\_\_\_
5. Citizen of \_\_\_\_\_  
(Pursuant to federal law, the Office is prohibited from hiring applicants who are citizens of particular countries.)
6. Name(s) of Parent(s): \_\_\_\_\_ Home Phone: \_\_\_\_\_
7. Home Address (if different from above): \_\_\_\_\_
8. Have you ever applied for an internship with our Office before?    Yes \_\_\_\_\_    No \_\_\_\_\_  
 If so, give date and brief description of outcome.

DATE	OUTCOME

9. Have you ever been employed by our Office before?    Yes \_\_\_\_\_    No \_\_\_\_\_  
 If so, give dates of employment and position.

DATES OF EMPLOYMENT	POSITION

10. Have you ever been employed by a congressional office other than ours? Yes \_\_\_\_\_ No \_\_\_\_\_  
If so, give dates of employment and name of office.

DATES OF EMPLOYMENT	NAME OF OFFICE

### EMPLOYMENT EXPERIENCE

11. (a) List most recent job first, etc. You must account for all periods of unemployment.  
[Note: You may attach additional pages if necessary.]
- (b) If currently employed, may we contact your present employer? Yes \_\_\_\_ No \_\_\_\_ Not Yet \_\_\_\_

<b>Name of Present or Most Recent Employer</b>	<b>From Month/Year</b>	<b>To Month/Year</b>
<b>Full Address and Telephone Number</b>		
<b>Your Position</b>	<b>Name and Title of Your Immediate Supervisor</b>	
<b>Duties &amp; Responsibilities</b>	<b>Current Salary/Salary at Leaving</b>	
<b>If you are no longer employed, reason for leaving</b>		
<b>Next Previous Employer</b>	<b>From Month/Year</b>	<b>To Month/Year</b>
<b>Full Address and Telephone Number</b>		
<b>Your Position</b>	<b>Name and Title of Your Immediate Supervisor</b>	
<b>Duties &amp; Responsibilities</b>	<b>Salary at Leaving</b>	
<b>Reason for Leaving</b>		
<b>Next Previous Employer</b>	<b>From Month/Year</b>	<b>To Month/Year</b>
<b>Full Address and Telephone Number</b>		
<b>Your Position</b>	<b>Name and Title of Your Immediate Supervisor</b>	

<b>Duties &amp; Responsibilities</b>	<b>Salary at Leaving</b>
<b>Reason for Leaving</b>	

## EDUCATION AND TRAINING

12. Please provide your educational background.

LEVEL	SCHOOL/CITY	MAJOR SUBJECTS	GRADUATE?		DIPLOMA/DEGREE RECEIVED or EXPECTED & YEAR
			Yes	No	
High School					
College					
Professional or Vocational					
Other (If relevant, including skills obtained during military service.)					

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

School Advisor: \_\_\_\_\_ Advisor's Phone: \_\_\_\_\_

Are you interested in earning college credit for internship: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what department: \_\_\_\_\_

If yes, name of supervising faculty: \_\_\_\_\_ Phone: \_\_\_\_\_

## SKILLS AND ACCOMPLISHMENTS

13. List the title and year of any job-related or school-related honors or awards you have received.

HONOR/AWARD	YEAR RECEIVED

14. List any special qualifications or skills (e.g., computer, public speaking and writing skills).

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15. List any experience in politics and/or government:

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16. If you have ever been granted a security clearance by any governmental agency, indicate level of clearance, when granted, and by whom.

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<p><b>INSTRUCTIONS FOR QUESTIONS 17-23</b></p> <p>If you answer “Yes” to any of the questions below, provide your explanation(s) in item 24. A “Yes” answer <b>will not necessarily disqualify you for an internship.</b></p> <p>For questions 18-22, <b>include</b> convictions resulting from a plea of nolo contendere (no contest). For questions 18-22, <b>omit:</b> (a) traffic fines of \$100.00 or less; (b) any conviction set aside under the Federal Youth Corrections Act or similar state law; and (c) any conviction that was expunged from your record pursuant to federal or state law.</p>	<p><b>YES</b></p>	<p><b>NO</b></p>
<p>17. During the last 10 years, were you fired from any job for any reason, did you quit after being told that you would be fired, or did you leave by mutual agreement because of specific problems?</p>		
<p>18. Have you ever been convicted of, or forfeited collateral for, a felony violation? Generally, a felony is defined as any violation of law punishable by imprisonment of longer than one year, except for violations called misdemeanors under state law which are punishable by imprisonment of two years or less.</p>		
<p>19. Have you ever been convicted of, or forfeited collateral for, any firearms or explosives violation?</p>		
<p>20. Are you now under charges for any violation of law?</p>		
<p>21. During the last 10 years, have you been convicted, forfeited collateral, been imprisoned, been on probation or been on parole? Do not include violations reported in 18, 19 or 20, above.</p>		
<p>22. Have you ever been convicted by a military court-martial?</p>		
<p>23. Have you ever had a security clearance suspended, denied or revoked?</p>		

24. **If you answered “Yes” to question 17**, explain for each job the problem(s) and your reason(s) for leaving. Give the employer’s name and address. (Use the box below.)

**If you answered “Yes” to question(s) 18-22**, explain each violation and give the date, place of occurrence and the name/address of the police or the court involved. (Use the box below.)

[Note: If you attach additional pages please include the item number.]

**If you answered “Yes” to question 23**, explain the reason(s) for the suspension, denial or revocation, the date of the suspension, denial or revocation, and governmental entity that suspended, denied or revoked the security clearance.

Item No.	Date (Mo./Yr.)	Explanation	Mailing Address		
			Name of Employer, Police or Court		
			City	State	Zip Code
			Name of Employer, Police or Court		
			City	State	Zip Code
			Name of Employer, Police or Court		
			City	State	Zip Code

## REFERENCES

Please identify the references from your reference letters.

NAME	TELEPHONE & ADDRESS	RELATIONSHIP	YEARS KNOWN

## INTERNSHIP PREFERENCES

Please indicate the city in which you would like to work, the dates you would be available to work, and whether you would be available for full-time or part-time work:

\_\_\_ Fall                      \_\_\_ Winter/Spring                      \_\_\_ Summer

Dates available: \_\_\_\_\_ \_\_\_ Part-time \_\_\_ Full-time

Location desired: \_\_\_ Washington \_\_\_ Bismarck                      \_\_\_ Fargo                      \_\_\_ Grand Forks                      \_\_\_ Minot

Why are you interested in an internship with the Office of Senator Kent Conrad?

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What skills or qualities do you have that would help you succeed in Senator Conrad's Office?

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# STATEMENT OF EQUAL EMPLOYMENT POLICY

The Office of Senator Kent Conrad is an equal employment opportunity employer in accordance with the requirements of Senate Rules and regulations and applicable federal laws.

## PARTICIPATION IN E-VERIFY PROGRAM

The law requires this Office to comply with the E-Verify Program established by the Department of Homeland Security (DHS) and the Social Security Administration (SSA). If you are hired by our Office, the Office will verify with the DHS and the SSA that you are eligible for employment in the United States.

## CERTIFICATION, RELEASE AND SIGNATURE

**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 selecting me for an internship, or for terminating my internship after I begin work, and may be punishable by fine or imprisonment (U.S. Code, Title 18 Sec. 1001).

I understand that any information I give may be investigated. **I consent** to the release of information about my ability and fitness for employment with the Office of Senator Kent Conrad by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel specialists, and other authorized employees or representatives of the Office of Senator Kent Conrad. I understand that for financial or lending institutions, medical institutions, hospitals, health care professionals, and some other sources of information, a separate specific release may be needed, and I may be contacted for such a release at a later date.

If selected for an internship and in consideration of my employment as an intern, **I agree** to conform to the rules and regulations of the United States Senate and the Office of Senator Kent Conrad. My employment may be terminated with or without cause and with or without notice, at any time, at the option of either the Office or me. I understand that no representative of the Office of Senator Kent Conrad has any authority to enter into any agreement of employment for any specific period or to make any agreement contrary to the foregoing.

**I understand that interns of the Office of Senator Kent Conrad are at-will employees. Nothing in this application alters an intern's at-will status.**

I have read and understand all of the above.

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Applicant's Signature

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Date (month, day, year)