

INTERNSHIP APPLICATION FORM FOR THE OFFICE OF CONGRESSMAN THOMAS MASSIE

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 or terminating your internship after you begin.

GENERAL INFORMATION

1. Name: _____

Last
First
Middle
2. Address: _____
3. Home/Mobile Telephone: _____ Work Telephone: _____
4. E-mail Address: _____
5. Availability: Full Time _____ Part Time _____
6. Date Available for Internship: _____

EDUCATION AND TRAINING

7. Please list your educational background.

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

8. List any qualifications or skills that would be relevant to a legislative internship (*e.g.*, skills with computers, public speaking experience and writing experience).

PERSONAL STATEMENTS

1. How do you feel you can best contribute to the office of Congressman Massie.

2. List the five legislative issue areas most important to you.

2. Explain the characteristics that best describe you.

3. What career goals would you like to have accomplished in 5-10 years?

4. If you were given \$1,000,000 and told to advance liberty, how would you spend it?

5. What do you consider your greatest life accomplishment so far?

6. Describe your political philosophy.

7. What do you want to get out of an internship with Congressman Thomas Massie and why do you want an internship with his office?

8. What policy positions of Representative Massie's do you agree with? Which to you disagree with?

REFERENCES

Please list three employer references. If you do not have three employer references, you may list academic references.

NAME	TELEPHONE & ADDRESS	OCCUPATION	YEARS KNOWN

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, 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 and that the Office of Congressman Thomas Massie reserves the right to conduct a background check, which may include a reference check, searches conducted on the Internet, and/or a criminal background check. **I consent** to such a background check and to the release of information about my ability and fitness for an internship with the Office of Congressman Thomas Massie 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 Congressman Thomas Massie. I understand that for financial or lending institutions, medical institutions, hospitals, healthcare 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 as an intern and in consideration of my internship, **I agree** to conform to the applicable rules and regulations of the United States House of Representatives and the Office of Congressman Thomas Massie. It is the policy of the Office of Congressman Thomas Massie that if I maintain a public, non-password-protected presence on any blog (including, without limitation, social and professional networking sites, social media sites, blog sites, media sites, and local and national political blogs and websites), I will be required to disclose that information to the _____ when I start my internship. This obligation is ongoing and applies even if I create, maintain, supplement, comment on, and/or edit the blog on my own time and using my own equipment.

My internship 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 Congressman Thomas Massie, except the Chief of Staff, has any authority to make any agreement contrary to the foregoing. Any such agreement between the Chief of Staff and me must be in writing.

I understand that interns of the Office of Congressman Thomas Massie are at-will. Nothing in this application alters an intern's at-will status.

I have read and understand all of the above.

Applicant's Signature

Date (month, day, year)