

Congressman Michael McCaul Internship Application

First Name	Middle Name		Last Name
Permanent Address			
City	State		Zip Code
How long have you live		Date of Birth	
Primary Telephone Cell Ph		one	Email address
Parents' Names			
Parents' Address			
College / University Attending			High School Attended
Major	Minor	Overall GPA	Current Classification
Significant high school	/ college activities		
U.S. Citizen: Y	esNo		
Preferred Office Locati	on : (Please list 1 st an	nd 2 nd choice if interested	in both locations)
Washingt	ton, DC	Austin To	omball
When are you available	for an internship?		
Fall Seme	ester	Spring Semester	Summer Semester

Please list three references:

1.			
	Name	Phone Number	Relationship
2.			
-	Name	Phone Number	Relationship
3.			
-	Name	Phone Number	Relationship

<u>**Questionnaire**</u> – On a separate sheet of paper, please answer the following questions (250 words maximum for each question)

- 1. What do you hope to gain from working as a congressional intern in Congressman McCaul's office?
- 2. Please describe your political philosophy.
- 3. Who in politics do you admire most (from any time period) and why?
- 4. What issue facing America is most important to you and why?
- 5. What qualifications and experience would you bring to this internship program?

I hereby certify that all the information provided in the application is accurate:

Signature

Date

ALONG WITH THIS APPLICATION AND ANSWERS TO THE ABOVE QUESTIONNAIRE, please send the following:

- Current resume and cover letter
- Current transcript (preferred)
- Two letters of recommendation

<u>Please return application and required documents to</u> <u>Congressman McCaul's Austin Office:</u>

ATTN: Internship Coordinator 9009 Mountain Ridge Drive Austin Building, Suite 230 Austin, TX 78759 PHONE: (512) 473-2357 FAX: (512) 473-0514