

United States Congressman
Mike Simpson
Representing Idaho's 2nd District

Intern Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Which term(s) are you applying for:

January To May May To August August To Dec

Which office(s) are you applying for:

Washington D.C Boise Twin Falls Idaho Falls

Education

High School: _____

College: _____ Major: _____

Class Status : _____ Cumulative GPA: _____

More About You

Campus Activities, Community Service, Other Interests:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____