

**Office of U.S. Senator Lisa Murkowski**

**College Intern Application**

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: \_\_\_\_\_

7. If selected for an internship, I can certify that I am eligible to work in the United States.

Yes  No

8. Have you ever applied for an internship with our office before? If so, give the date and a brief description of the outcome (including the dates of your internship if you have been an intern with our office previously).

9. Have you ever been employed by a congressional office other than ours? If so, give the dates of employment/internship and name of the office.

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.

## Employment Experience

List most recent job first, etc. (Note: You may attach additional pages if necessary.)

1. If currently employed, may we contact your present employer?

Yes

No

Not Yet

A. Name of present of most recent employer: \_\_\_\_\_

From Month/Year: \_\_\_\_\_ To Month/Year: \_\_\_\_\_

Full Address and Telephone Number:

\_\_\_\_\_

Your Position:

Name and Title of Your Immediate Supervisor:

\_\_\_\_\_

B. Name of previous employer: \_\_\_\_\_

From Month/Year: \_\_\_\_\_ To Month/Year: \_\_\_\_\_

Full Address and Telephone Number:

\_\_\_\_\_

Your Position:

Name and Title of Your Immediate Supervisor:

\_\_\_\_\_

C. Name of previous employer: \_\_\_\_\_

From Month/Year: \_\_\_\_\_ To Month/Year: \_\_\_\_\_

Full Address and Telephone Number:

\_\_\_\_\_

Your Position:

Name and Title of Your Immediate Supervisor:

\_\_\_\_\_

## Education Experience

Please give your educational background.

1. High School: \_\_\_\_\_ Did you graduate?  Yes  No

2. College: \_\_\_\_\_ Did you graduate?  Yes  No

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Diploma or Degree Received: \_\_\_\_\_ GPA: \_\_\_\_\_

## **Skills and Accomplishments**

List the title and year of any honors or awards you have received that would be relevant to a legislative internship.

List any qualifications or skills that would be relevant to a legislative internship (*e. g.*, skills with computers, public speaking experience, and writing experience). Please list experience with managing a team of Alaskans, leadership groups, organizations etc.

