



**U.S. COMMERCIAL SERVICE
U.S. EMBASSY – MEXICO CITY**

**APPLICATION FOR FOREIGN NATIONAL
STUDENT INTERN PROGRAM**

Position title: _____

Full name: _____
LAST (SURNAME) FIRST MIDDLE

Present address, telephone number, email:

Do you have any relatives that work for the Embassy/Consulate? If yes, please list name, department where they work and how long they have been employed.

Current citizenship: _____

Do you have any claim to U.S. citizenship? Yes _____ No _____

University/School/Educational Institution: For each institution you have attended, provide the following information in the space below. Begin with your present school and work backwards. Use continuation sheets if necessary.

Name and full address of current institution:

Name, title and telephone number of instructor:

Dates Attended (Month/Year) _____ Diploma/Degree/Certificate _____

Date Received _____ Major Field of Study _____

Languages: Identify the language and indicate extent of your competence for each:
5 = fluent; 3 = good; 1 = fair; 0 = not at all

LANGUAGE SPEAK READ WRITE UNDERSTAND

English _____

Special Qualifications and Skills: List any special skills you possess and equipment you can use, certifications, licenses obtained, etc.

Training received: List training received in areas applicable to the internship position in which you are applying.

Employment (if applicable): Begin with your most recent position and work backwards.

Name and full address of employer _____

Dates worked (month/day/year): From _____ To _____

Exact title of position _____

Name, title and telephone number of immediate supervisor _____

Description of work _____

Number of hours worked per week _____ Number of employees you supervised _____

Reason for leaving _____

Have you ever worked for the U.S. Government? _____

Have you ever been dismissed or forced to resign from a position? _____

If yes, please explain: _____

Computer Skills:

How do you rate your computer skills? (please circle)

5 = excellent; 3 = good; 1 = fair, 0 = none

List computer program in which you have experience:

References: Please list three persons not related to you by blood or marriage who are qualified to supply definite information regarding your character and suitability for employment under the program. DO NOT include former employers (ie. supervisors.)

Name	Mailing address	Telephone	Occupation
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You must sign this application. Please read the following carefully before you sign:

___ I understand that any information I give may be investigated and that a false statement may be grounds for non-consideration or dismissal of my participation in the Intern Program, if I am selected.

___ I understand that, if I am provisionally selected, an Embassy-required security certification is a prerequisite.

___ I consent to the release of information about my ability and fitness for the Intern Program by employers, schools, law enforcement agencies and other individuals and organizations to the Embassy-authorized investigators and personnel.

___ I certify that, o the best of my knowledge, all of my statements are true, complete, and made in good faith.

Signature of applicant

Date

CONTINUATION SHEET: ADDITIONAL INFORMATION (if applicable)

Employment (if applicable): Begin with your most recent position and work backwards.
Duplicate continuation sheets as needed

Name and full address of employer _____

Dates worked (month/day/year): From _____ To _____

Exact title of position _____

Name, title and telephone number of immediate supervisor _____

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