

United States Senator Amy Klobuchar
Internship Application

Personal Information:

Name _____
Date of Birth _____
Social Security Number _____

Please select the office(s) you are interested in interning with:

Minnesota

Summer Spring/Fall

Washington, D.C.

Summer Spring/Fall

Full Time Part Time

Availability (___/___/___ – ___/___/___)

Current Address:

Street: _____
City: _____
State: _____
ZIP: _____
Current Telephone Number: _____
E-Mail Address: _____

Permanent Address:

Street: _____
City: _____
State: _____
ZIP: _____

School Information:

School: _____
GPA: _____
Major: _____
Minor (if applicable): _____

Year of School
(as of today): Freshman Sophomore Junior Senior

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Graduation Year: _____
School Registrar's
Phone Number: _____
Are You Seeking Credit
for this Internship?: _____
Relevant School Activities: _____

Citizenship Information:

Are you a citizen of the United States?

Yes No

If no, what type of visa do you hold? _____
From what country? _____

Emergency Contact Info:

Name: _____
Relation: _____
Street: _____
City: _____
State: _____
ZIP: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____

Please include:

- Application form (attached here)
- Cover Letter
- Resume
- Short (3 Page Max) Writing Sample
- Three References

Please Note the Following Deadlines:

- Summer Term: March 21st
- Fall Term: July 27th
- Spring Term: November 20th