

**The Office of Senator John D. Rockefeller IV  
Internship Application**

**Personal Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Home Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

School Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Position Applied for:

Your First Choice for Office Location      Washington, DC       Charleston

I am available for a position      Part Time       Full Time

During the:      Fall       Spring       Summer (full-time only)   
Specific Dates Available:

**Education Information**

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ Degree: \_\_\_\_\_

Graduate: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ Degree: \_\_\_\_\_

Will you receive credit for this internship?      Yes       No

**Work Experience: Please include relevant work and/or volunteer experience**

Employer:

Location:

Position:

Responsibilities:

Dates:      From:      To:

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Employer:

Location:

Position:

Responsibilities:

Dates:

From:

To:

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Employer:

Location:

Position:

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Dates:

From:

To:

### Short Answer

*Please limit your response to no more than one page. Use a separate sheet if necessary.*

What do you want to learn as an intern in Senator Rockefeller's office?

*Please include a cover letter, resume, two letters of recommendation (no more than one from a professor), and a short writing sample with your application. Thank you.*

**Due to security delays in mail processing, please fax applications to (202) 224-7665 to ensure timely receipt.**