

**INTERNSHIP APPLICATION
OFFICE OF CONGRESSMAN BART GORDON**

NAME

PERMANENT ADDRESS

PERMANENT TELEPHONE NUMBER (_____) _____ - _____

CURRENT ADDRESS

CURRENT TELEPHONE NUMBER (_____) _____ - _____

NAME OF SCHOOL IN WHICH YOU ARE ENROLLED (IF APPLICABLE)

ADDRESS OF THE SCHOOL

EXPECTED GRADUATION DATE CIRCLE ONE

Fall Spring Summer 2_____

DATES AVAILABLE FOR INTERNSHIP _____ THROUGH

ARE THESE DATES FLEXIBLE? YES NO

**WHERE DO YOU PREFER TO INTERN IN TENNESSEE OR WASHINGTON,
D.C.?**

INTERNSHIPS ARE PRIMARILY FOR EDUCATIONAL PURPOSES. THERE IS NO GUARANTEE OF COMPENSATION. PLEASE INDICATE YOUR REQUIREMENTS:

- COMPENSATION REQUIRED**
- COMPENSATION PREFERRED, BUT WILL CONSIDER UNCOMPENSATED WORK**
- COLLEGE CREDIT/USE EXPERIENCE AS PROJECT PAPER FOR COURSE WORK**

POLITICAL AFFILIATION

PLEASE STATE BRIEFLY WHY YOU ARE INTERESTED IN AN INTERNSHIP WITH CONGRESSMAN GORDON

WHAT ARE THE LEGISLATIVE/PUBLIC POLICY ISSUES THAT ARE OF THE GREATEST INTEREST TO YOU?

FOR THIS PART OF THE APPLICATION, PRETEND YOU ARE A MEMBER OF CONGRESS. YOU HAVE RECEIVED A LETTER FROM A CONSTITUENT ON AN ISSUE OPPOSING YOUR VIEW. PLEASE RESPOND TO THE CONSTITUENT ON AN ISSUE OF YOUR CHOICE. THE LETTER SHOULD FIT COMFORTABLY ON ONE SHEET OF PAPER.

PLEASE SUBMIT THIS FORM WITH A CURRENT RESUME TO:

**OFFICE OF CONGRESSMAN BART GORDON
2368 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, D.C. 20515-4206
ATTN: INTERN COORDINATOR**