



Senator Jim DeMint

Intern Application

Phone (202) 224-6121 / (202) 228-5143 Fax

Personal Information:

Full Name: _____

Current Address: _____

Permanent Address: _____

Home Phone: (____) ____ - ____

Cell Phone: (____) ____ - ____

Email Address: _____

Birthdate: _____

Parent/Guardian Name: _____

Home Phone: (____) ____ - ____

Cell Phone: (____) ____ - ____

Session Applying for: Spring ____ Summer 1 ____ Summer 2 ____ Fall ____

Educational Information:

High School: _____ Year Graduated: _____

College Attended: _____ GPA: _____

Major/Minor: _____ Expected Year of Graduation: _____

Extracurricular Activities and Areas of Interest: _____

Please answer the following questions concisely yet thoroughly:

You may use a separate sheet of paper if necessary.

1. Briefly list the areas of public policy that most interest you, and explain why those particular issues are important.

2. Briefly describe what you expect to learn from an internship with Senator DeMint and how you envision yourself contributing to our office.

3. Describe your greatest strength.

4. Describe your greatest weakness.

5. Describe your career goals.

Please list the names of three references and their contact information:

Name	Telephone	Relationship
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Please attach the following:

- 1. A current resume**
- 2. An official copy of your college transcript**
- 3. 2-3 letters of recommendation**

Return this completed application to:

**Senator Jim DeMint
Attn: Ben Siegrist
340 Russell Senate Office Building
Washington, DC 20510**

E-mail: Chris_Carino@demint.senate.gov

Fax: (202) 228-5143

Phone: (202) 224-6121

**Deadlines: Spring Session: December 1
Summer Sessions: March 1
Fall Session: August 1**