

# Internship Application

## Office of Senator Joe Donnelly

*Senator Donnelly accepts all applications for internships; however, applicants from Indiana will be given preference. All internships are unpaid.*

### APPLICANT INFORMATION

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

School Address (If Different): \_\_\_\_\_  
(Street) (City) (State) (Zip)

Contact Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_ Are you an Indiana Resident? \_\_\_\_\_

Please check which office you would like to intern in:

Washington DC: \_\_\_\_\_ Indianapolis: \_\_\_\_\_  
South Bend: \_\_\_\_\_

Which term are you applying for?

Winter/Spring 2017: \_\_\_\_\_ Summer: May 15, 2017 through August 18, 2017 \_\_\_\_\_  
Fall 2017: \_\_\_\_\_

NOTE: There is some flexibility with regards to the start and ending dates for both summer sessions

### EDUCATIONAL BACKGROUND

College: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

• Major/Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

Graduate/Law School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

• Major/Minor: \_\_\_\_\_ GPA: \_\_\_\_\_

### BACKGROUND INFORMATION

Have you ever served as an Intern? \_\_\_\_\_ When/Where? \_\_\_\_\_

**For the following sections, you may include additional pages when necessary**

What specific experience would you like to gain through this internship?

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Describe your long-term career goals:

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Please list your activities/interests you enjoy:

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Involvement in Community Service:

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**WRITING SAMPLE**

*Please explain why you would like to have an internship in Senator Joe Donnelly’s office and what you hope to gain from this experience. Please type out your essay and keep your remarks to one-page. This will serve as your writing sample.*

*Please turn the application over to complete the last page*

**Disclosure**

Have any disciplinary or administrative actions (ex. probation, suspension, expulsion) been taken against you by your school or are any pending? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor offense? Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered "Yes" to any questions above, please provide an explanation on a separate page.

**Certification**

*My statements on this form and on all of my application materials are true to the best of my knowledge and belief. I understand that knowingly making false statements will lead to the rejection of my application or removal from the internship program.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>RETURN APPLICATION</b>
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Include your application, cover letter, writing sample, resume and three references.

Please send your application to the following offices based on the office you are interested in serving.

Washington DC: Please submit your application on-line to [ellen\\_webne@donnelly.senate.gov](mailto:ellen_webne@donnelly.senate.gov) or fax it to **202-224-5011**. Due to delays in processing of postal mail sent to Washington DC, *please do not mail in your application*.

Indianapolis: Please submit your application on-line or mail it to 115 North Pennsylvania Street, Suite 100 Indianapolis, IN 46204.