

Congressman Womack's Washington, D.C. Internship Application

Printed Name _____

Signature _____

Date _____

Permanent Address: _____

Mailing Address (if different from permanent address): _____

Phone: _____

Email: _____

Date of Birth: _____

University/College: _____

Major/Minor and Cumulative GPA: _____

Expected Graduation Date: _____

Please check for which semester/period you are applying:

☐ Fall (August-December) ☐ Spring (January-May) ☐ Summer I (May-June) ☐ Summer II (July-August)

Will you be available full-time or part-time?

Note: You must be available full-time to participate in a summer internship in D.C.

The following items are required for consideration. Please use this checklist for your application packet. It is your responsibility to provide all accurate and relevant information in your application.

- ☐ Copy of a current resume
- ☐ Two letters of recommendation-one academic and one professional along with their contact information
- ☐ One page essay addressing the following: Notable academic or work experience, goals for this internship, long-term goals, and any additional qualities that you deem would be helpful in a Congressional office

Please e-mail your completed application to:

Congressman Womack
c/o Madison Piel
Madison.Piel@mail.house.gov

Questions? Please call (202) 225-4301 and ask to speak with the Intern Coordinator.