

CONGRESSMAN HUIZENGA

INTERNSHIP PROGRAM



Please type or print your responses and use extra paper as necessary.

Name: _____

Permanent Address: _____

Current Address: _____

Telephone Number: _____

Cell Phone Number: _____

Email: _____

Birth Date: _____

High School Attended: _____

Year of Graduation: _____

College or University: _____

Expected Graduation Date: _____

Major/Degree: _____

Minor: _____ **GPA:** _____

District or DC Internship: _____

College Leadership Roles, Activities, Achievements, and Interests

In which internship term(s) are you interested?

- ___ Fall
- ___ Spring
- ___ Summer

Please include the dates you are available: _____

Do you expect to receive college credit for this internship? Yes No

If yes, please explain the conditions required for credit to be granted:

What is the name and phone of your program coordinator: _____

Please attach the following to your application:

1. A brief essay (250 words or less) explaining why you would like to intern with Congressman Huizenga;
2. A current resume;
3. A list of three references with phone numbers and email addresses included;

Signature: _____ Date: _____

DC Applicants – please email copy to Phillip.Rokus@mail.house.gov
District Applicants – please email copy to Sarah.Lisman@mail.house.gov

If you have questions, please contact the Intern Coordinator Phillip Rokus at 202.225.4401 his email provided above.