



U.S. SENATOR JIM WEBB
INTERNSHIP PROGRAM

Name: _____

Permanent Address: _____

City: _____ State: _____ Telephone #: _____

College: _____ Year in School: _____

Major: _____ Minor: _____ GPA: _____

Will you be receiving college credit? _____

Activities: _____

High School: _____ Year Graduated: _____

EMPLOYMENT HISTORY

Employer	Position/Type of Work	Dates

SIGNATURE: _____ DATE: _____

For summer applicants – you must have completed your junior year in college. Please submit a cover letter (no longer than 400 words) explaining your interest in the internship program and how it would help you achieve your academic or career goals. **AN OFFICIAL TRANSCRIPT AND TWO LETTERS OF RECOMMENDATION MUST BE ATTACHED TO THIS APPLICATION.**

Return signed application, cover letter, transcript, and recommendations to:

E-Mail: kathy_wilmoth@webb.senate.gov

Mail: U.S. Senator Jim Webb
United State Senate
Washington, DC 20510
Attn: Intern Coordinator

Fax: (202) 228-6363
Attn: Intern Coordinator

Please call Kathy Wilmoth at (202) 224-6899 with any questions.