

Internship Application

Name:	
Permanent Address:	
Telephone (Home):	(Cell):
High School:	
Undergraduate:	GPA:
School Address:	
Degree/Major/Minor:	
Classification:	Expected Graduation Date:
Extracurricular Activities:	
During which term do you wish to serve as an intern?	
Earliest date available:	Last date available:

Would you be available fu	ll time (9am-6pm)?		
Yes			
No			
Are you interested in inter	ning in one of our Iowa offices?		
Yes			
No			
Please rank your office pro	eferences:		
Washington, D.C.	Cedar Rapids	Council Bluffs	
Davenport	Des Moines	Sioux City	
	ge credit for your internship? ef description of your program's i	requirements.)	

Please send the following along with your completed application:

Cover Letter describing why you would like to intern for Senator Ernst

Resume

Transcript (Unofficial copy is acceptable)

Two Reference Letters

Description of Program Requirement if seeking college credit

Applications can be submitted electronically to Ernst_Internships@Ernst.Senate.Gov or by fax to (202) 224-9369.