COMMITTEE ON WAYS AND MEANS
GRADUATE INTERNSHIP PROGRAM
Application Form

Please attach with application, **a resume** listing two references (personal, professional or academic) AND **a one page (maximum) essay** on a topic relevant to the committee's jurisdiction. **Applications should be emailed to Ways&MeansRepublicans@mail.house.gov.**

GENERAL INFORMATION (TYPE OR PRINT)

Name_____
         Last   First   Middle Initial

Present Address_____
            Street   City   State/Zip

Preferred Phone Number_____ Date of Birth_____
            Please include area code   Month   Day   Year

Availability (Please Circle): Monday   Tuesday   Wednesday   Thursday   Friday   Start Date:_____ End Date:_____

E-Mail Address_____

ACADEMIC INFORMATION

College/University_____
              School Name   City   State

Major_____Minor_____GPA_____Graduation_____/_____
                                                                              Month/ Year

Graduate School_____
              School Name   City   State

Type of Graduate Degree_____GPA_____Graduation_____/_____
                                                                              Month/ Year

Will you be receiving credit for your internship through your school? (Circle One)   *Yes*   *No*

Are you looking for a job in Washington, D.C.?   *Yes*   *No*

Have you worked in an office environment before? (Circle One)   *Yes*   *No*

Have you worked for an elected official or election candidate before? (Circle One)   *Yes*   *No*

If so, for who and which office?_____
(If you have worked for multiple offices and/or elections, please list the most recent first)

SUBCOMMITTEES OF INTEREST

Please rank, with 1 being your first choice and 6 your last choice, which subcommittees you would be interested in working with (Leave blank if you have no preference)

Health_____ Human Resources_____ Oversight____ Select Revenue Measures_____ Social Security_____ Trade_____

CERTIFICATION

In signing below, I certify that the information provided in this application is accurate.

Signature of Applicant_____Date_____