

# CONGRESSIONAL LEADERSHIP FUND



## Internship Application for Congressional Leadership Fund

Name: \_\_\_\_\_ Year: \_\_\_\_\_

High School/College: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

What do you hope to gain from this internship experience?

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What are your career goals?

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List any skills or past experience.

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## Internship Terms and Agreements

**Our Mission:** The internship program is intended to foster an educational and workplace readiness experience for students between the ages of 14 and 24 in the fields of political management, leadership, and communications.

Once my schedule is set, I am responsible for being at the CLF Office for the duration of the time I choose. If I cannot come into the office or other work place designated by staff, I am responsible for notifying staff by phone or email as soon as possible. Unless of an emergency, soon as possible is defined as two days before your scheduled shift.

As a representative of the Congressional Leadership Fund, I agree to treat all staff, fellow interns, volunteers, and other people with respect. This includes dressing in an appropriate manner and being polite at all times.

A minimum of 50 hours must be completed in order to receive a letter of recommendation. All other service will be certified with a letter.

## What Times are you Available to work?

Monday AM:	Monday PM:
Tuesday AM:	Tuesday PM:
Wednesday AM:	Wednesday PM:
Thursday AM:	Thursday PM:
Friday AM:	Friday PM:
Saturday AM:	Saturday PM:

\_\_\_\_\_  
Signature of Intern

\_\_\_\_\_  
Print Name

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Print Name

Date: \_\_\_\_\_

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