



Congressman Larry Bucshon Internship Application

Personal Information:

Name: _____
(First) (Middle) (Last)

Current Address: _____
(Street Address)

(City) (State) (Zip)

Permanent Address: _____
(Street Address)

(City) (State) (Zip)

Phone Number: _____ Alternate Phone Number: _____

Date of Birth: ____/____/____

Email Address: _____

Internship Information:

Please check the desired location of your internship.

____ Washington, D.C. ____ Evansville, IN ____ Terre Haute, IN

Please check the desired session of your internship.

___ Spring Session/January-May
Deadline is November 15th

___ Summer Session-1/May-June
Deadline is March 15th

___ Summer Session-2/July-August
Deadline is May 15th

___ Fall Session/September-December
Deadline is July 15th

Education Information:

College: _____

___ Freshman ___ Junior ___ Sophomore ___ Senior

Major: _____ Minor: _____

High School Attended: _____ G.P.A.: _____

Extracurricular Activities: _____

Writing Sample:

Please answer all of the following questions in a separate document.

1. Briefly list the areas of public policy that most interest you and explain why those particular issues are important to you.
2. Briefly describe what you expect to learn from an internship with Congressman Bucshon and how you envision yourself contributing to our office.
3. Describe your greatest strength and weakness.
4. Describe your career goals.
5. What do you believe the role is of the federal government?

