



Internship Application

Contact Information

First: _____ Middle: _____ Last: _____
Email Address: - _____ Date of Birth: _____
Home State: _____ Cell Phone Number: _____

Residential Address

Street Address: _____
City: _____ State: _____ Zip: _____

Mailing Address (if different)

Street/Box #: _____
City: _____ State: _____ Zip: _____

Academic Information

College/University Attending: _____ Major: _____
GPA: _____ Graduation Date: _____ Is academic credit available for internships?: Yes ☐ No ☐

Applicant Information

Are you a resident of OK-05?: Yes ☐ No ☐
Are you a U.S. Citizen: Yes ☐ No ☐
Which semester are you applying for? _____
Preferred office location: D.C. ☐ District ☐
How did you hear about the internship opportunity? _____

Socials

Please provide your username:

LinkedIn: _____

X/Twitter: _____

Instagram: _____

Facebook: _____

Other: _____

Availability

<i>Day:</i>	Monday	Tuesday	Wednesday	Thursday	Friday
<i>Time Available:</i>					

Preferred start date: _____ Preferred end date: _____

Along with the application, provide your current resume and cover letter. Please note which semester you are applying for and which office you want to work in. You may send completed applications or any questions to the appropriate Intern Coordinator.

Washington, D.C. Office

D.C. Intern Coordinator

Attn: Grace Utz - Intern Coordinator

OK05internship@mail.house.gov

District Office

District Intern Coordinator

Attn: Emma Farris - Intern Coordinator

OK05internship@mail.house.gov

I HEREBY CERTIFY that all the information I have supplied in this application is correct and complete. I give the Office of Congresswoman Stephanie Bice permission to contact any or all my previous employers, my references, and my schools for verification of the contents of this application and qualifications for this internship.

Signature

Date: