

**Eastern District of Wisconsin - INTERNSHIP APPLICATION**

**(email all required documents to** [**jobs\_WIEP@wiep.uscourts.gov**](mailto:jobs_WIEP@wiep.uscourts.gov) **)**

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| **GENERAL INFORMATION** | |
| Applicant Name | Applicant Address |
| Telephone Number Day:  Evening: | Social Security Number |
| Date of Birth | Place of Birth |
| Driver License Number | Which state issued your driver’s license?  Is your driver’s license valid? |
| List Other Names You Have Previously Used | Name and Address of College/University |
| Major | Expected Data of Graduation |
| Name of Advisor | Telephone Number of Advisor |

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| **EMERGENCY CONTACT** | | |
| Name | Address | Phone Number |

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| **AVAILABILITY FOR INTERNSHIP** | | | |
| Spring | Summer | Fall | Winter |
| Is an Internship Required by Your School? | | Number of Internship Hours Required by Your  School | |
| Days Available (check all that apply): Mon Tues Wed Thurs Fri | | | |



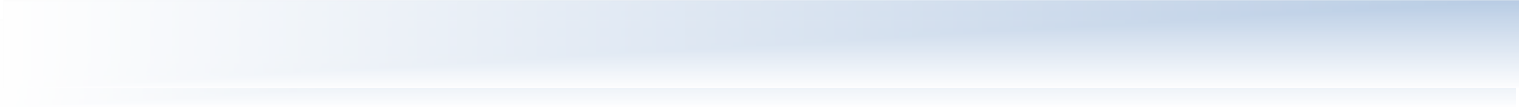


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| **EMPLOYMENT (A resume may be substituted for this section)** | | |
| Name and Address of Employer: | | Telephone Number: |
| Dates Employed | Job Title | Immediate Supervisor |
| Describe your specific duties, responsibilities, and accomplishments in this job: | | |
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| **EDUCATION** | | | |
| **HIGH SCHOOL** (List the last high school you attended or where you obtained your high school  equivalency - GED) | | | |
| Name of School | Address of School | Entrance Date | Graduation Date |

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| **COLLEGE OR UNIVERSITY** (If you expect to graduate within one year, give the *month* and *year* in which  you expect to receive your degree) | | | | |
| Name of School | Address of School | Entrance Date | Graduation Date | Degree |
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| **OTHER COURSES OR TRAINING** (Armed Forces, trade, vocational or business which related to the  internship you are applying for) | | | | |
| Name | Address | Dates Attended | Subject | Training Completed? |





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| **SPECIAL SKILLS** |
| **SPECIAL SKILLS, ACCOMPLISHMENTS AND AWARDS** (List the title and year of any honors, awards, or fellowships you have received. List your special qualifications, skills or accomplishments, especially with computers, machines, public speaking, and writing) |
| Do you speak or read a language other than English? If yes, please list the language. |

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| **REFERENCES** (List three people who are not related to you and know your qualifications for the internship) | | |
| **Name** | **Telephone Number** | **Relationship to You** |
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| **BACKGROUND INFORMATION** | | |
| **Yes** | **No** |  |
|  |  | Were you terminated from any job for any reason, did you quit after being told that you would be terminated, or  did you leave by mutual agreement because of specific problems? |
|  |  | Have you ever been cited, arrested, or convicted of any misdemeanor or felony crime? |
|  |  | Are you now under charges for any violation of law? |
| If you answered yes to any of the above questions, please explain below. | | |





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| **YOU MUST SIGN THIS APPLICATION** (Read the following carefully before you sign). | |
| 1. A false statement on any part of your application may be grounds for dismissing you after you begin your internship. 2. I consent to the release of information about my ability and fitness for a Federal internship by employers, school, law enforcement agencies and other individuals and organizations, to personnel staffing specialists and other authorized employees of the Federal Government. 3. I acknowledge my services are voluntary in a cooperative educational internship program with the U.S. Probation Office, in the Eastern District of Wisconsin. I understand that the U.S. Probation Office is acting solely as a host in this arrangement by providing a work-related educational experience. I waive any claim or right to receive salary or other compensation, including fringe benefits, from the Federal Government, as a result of my work-training services to the U.S. Probation Office. 4. I waive all right to any personal copyright privileges in any work product prepared by me in the course of my service to the U.S. Probation Office. I recognize that information which I obtain or have access to in the course of this internship is of a confidential nature, and I agree to preserve the confidentiality of such information. 5. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith. 6. I hereby authorize the United States Probation Office, District of Wisconsin, to conduct both a national and state criminal history check as part of the background investigation for prospective interns in a sensitive position. I understand that an internship with the United States Probation Office is contingent upon acceptable results from my criminal history check. | |
| **Signature** | **Date** |

