Senator Gillibrand’s Senate internship program provides an excellent opportunity for students to learn and serve through first-hand participation in government service, and the legislative process. The program is intended to provide participants with the tools, skills, and experience that they can readily apply to future challenges and professional pursuits. We expect a great deal from our interns. Candidates will have a diverse, challenging experience and make a genuine contribution to Senator Gillibrand’s work on behalf of New York and the nation. Candidates are often students and recent graduates of all levels, from high-school, to undergraduates, graduate school and law school.

We welcome all applicants who have demonstrated academic excellence and have displayed a commitment to public service. While preference is given to New York residents, students from all backgrounds are encouraged to apply.

THE APPLICATION PROCESS

Please complete all sections of the application thoroughly. Although providing the information requested is voluntary, failure to provide complete answers may affect the review and consideration of your application. Your application must include all of the following in order to be considered:

- **Internship Application Form**
- **Current Resume**
- **One page cover letter** describing why you want to be an intern in the Office of Senator Gillibrand and what you would bring to the office
- **Writing sample** (No strict requirements, other than that it should show your ability to communicate and concisely express ideas in 2-4 pages.)
- **Two References**: please include name, title, email address, and telephone number
- **A transcript** may be requested. Unofficial transcripts are OK.

The application and requested materials should be submitted together via the means submitted below. Given the volume of incoming applications, we will not be able to return any of the materials we receive. Failure to meet any of the above-mentioned requirements may delay, or even prevent, the review of your application.
Candidates should submit complete applications to the office where they wish to intern by facsimilie or e-mail (for the Washington, DC Office and NYC office – applications for all other office should be faxed). If you are applying to multiple offices, please send an application to every office to which you’re applying. Contact information for each of Senator Gillibrand’s offices is shown below:

<table>
<thead>
<tr>
<th>Washington, D.C. Office</th>
<th>New York City Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>ATTN: Intern Coordinator</td>
<td>ATTN: Intern Coordinator</td>
</tr>
<tr>
<td>Office of Senator Gillibrand</td>
<td>Office of Senator Gillibrand</td>
</tr>
<tr>
<td>Tel. 202-224-4451 Fax 202-224-1560</td>
<td>Tel. 212-688-6262 Fax 212-688-7444</td>
</tr>
<tr>
<td><a href="mailto:Gillibrand_Internship@gillibrand.senate.gov">Gillibrand_Internship@gillibrand.senate.gov</a></td>
<td><a href="mailto:Gillibrand_InternshipsNYC@gillibrand.senate.gov">Gillibrand_InternshipsNYC@gillibrand.senate.gov</a></td>
</tr>
<tr>
<td>Albany/Capital District Office</td>
<td>Buffalo Office</td>
</tr>
<tr>
<td>ATTN: Intern Coordinator</td>
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</tr>
<tr>
<td>Office of Senator Gillibrand</td>
<td>Office of Senator Gillibrand</td>
</tr>
<tr>
<td>Leo W. O’Brien Federal Office Building</td>
<td>Larkin At Exchange</td>
</tr>
<tr>
<td>1 Clinton Square, Room 821</td>
<td>726 Exchange Street, Suite 511</td>
</tr>
<tr>
<td>Albany, NY 12207</td>
<td>Buffalo, NY 14210</td>
</tr>
<tr>
<td>Tel. 518-431-0120, Fax 518-431-0128</td>
<td>Tel. 716-854-9725, Fax 716-854-9731</td>
</tr>
<tr>
<td>Long Island Office</td>
<td>Rochester Office</td>
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<tr>
<td>ATTN: Intern Coordinator</td>
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</tr>
<tr>
<td>Office of Senator Gillibrand</td>
<td>Office of Senator Gillibrand</td>
</tr>
<tr>
<td>155 Pinelawn Road</td>
<td>Kenneth B. Keating Federal Office Building</td>
</tr>
<tr>
<td>Suite 250 North</td>
<td>100 State Street, Room 4195</td>
</tr>
<tr>
<td>Melville, NY 11747</td>
<td>Rochester, NY 14614</td>
</tr>
<tr>
<td>Tel. 631-249-2825, Fax 613-249-2847</td>
<td>Tel. 585-263-6250, Fax 585-263-6247</td>
</tr>
<tr>
<td>Syracuse/Central New York Office</td>
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<tr>
<td>ATTN: Intern Coordinator</td>
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<tr>
<td>Office of Senator Gillibrand</td>
<td></td>
</tr>
<tr>
<td>James M. Hanley Federal Building</td>
<td></td>
</tr>
<tr>
<td>100 South Clinton Street, Room 1470</td>
<td></td>
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<tr>
<td>PO Box 7378</td>
<td></td>
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<tr>
<td>Syracuse, NY 13261</td>
<td></td>
</tr>
<tr>
<td>Tel. 315-448-0470, Fax 315-448-0476</td>
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</tbody>
</table>
SESSION DATES AND APPLICATION DEADLINES:

FALL/WINTER SESSION 2012 (August – End of December)
**NYC:** Applicants will be admitted on a rolling basis.

SPRING SESSION 2011 (January – May):
**NYC:** Applicants will be admitted on a rolling basis.
It is recommended to submit your application before November 15, 2011.

SUMMER SESSION 2012 (May-August)
Deadline is March 19, 2012

Applications must be e-mailed or faxed by the deadline date for each session. Notification about the status of your application will be e-mailed to you.

FUNDING

Please note that all internships are unpaid. However, candidates are permitted under Senate Rules to apply for and accept financial assistance from appropriate outside sources. Nonetheless, Senate Rules allow that receipt of financial assistance from outside sources does not create a conflict of interest with your Senate work. Please indicate in the space provided on the application if you plan to receive funding from an outside source.

ACADEMIC CREDIT

Awarding academic credit for an internship is at the discretion of your college or university. However, we will assist you in providing appropriate information as requested by your school. Arrangements for accreditation should be made before you begin the internship.
SENATOR KIRSTEN GILLIBRAND
INTERNSHIP APPLICATION FORM

-Please type or print legibly-

PERSONAL INFORMATION:

Full Name_________________________  ___________________________  ___
   Last                          First                          Middle Initial

Today’s Date: ______________

Place of Birth________________________
   City                        State

Date of Birth ___/___/_______

Current Phone (_____ ) _______ - __________

Home Phone (_____ ) _______ - __________

Current (School) Address          Permanent Address
   ________________________________  ________________________________
   ________________________________  ________________________________
   ________________________________  ________________________________
   ________________________________  ________________________________
   ________________________________  ________________________________

E-mail address: __________________________

Prior Political/Government Experience:
   ______________________________________

Areas of Interest (Please be as specific as possible):
   ______________________________________

How did you hear about Senator Gillibrand’s Internship Program?
   ______________________________________
   ______________________________________

Have you applied to this internship before? If so what office/season?: Yes ___  No ___
ACADEMIC INFORMATION:

Are you currently a student? Yes___ No ____

If yes, please select one: High School College/University Graduate/Law

If no, please select highest degree completed:

High School College/University Graduate/Law

Year of Graduation: _______ GPA:_______ Major: _____________________________

INTERNSHIP INFORMATION:

Please rank your preferences in internship location:

Washington D.C. _______ Buffalo _______
New York City _______ Long Island _______
Albany _______ Syracuse _______
Rochester _______

Please check the session for which you are applying:

Fall/Winter 2011 _______
Spring 2012 _______
Summer 2012 _______

Please note that Summer Sessions in D.C. are divided into two separate sessions. D.C. Summer Session I runs from around the middle of May until the end of July. D.C. Summer session II runs from the beginning of July until the middle of August. If you are applying to the D.C. office please indicate which session you would prefer. If you are willing to intern during either session you may check off both. D.C. Summer Session I _______ D.C. Summer Session II _______
Please note the range of time [earliest/latest date] you are available to take part in the internship program: _____________ to ______________.

Please circle: part-time or full-time (Senator Gillibrand’s office is open 9AM-6PM)

If part-time or for current students, please detail the availability of your schedule:

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Note: Interns are expected to make a commitment of at least 20 hours per week during the Academic Semester. Summer Programs are full time

**Department Preferences:**
Please rank the departments in the order in which they interest you: 1=highest, 3=lowest

Within Constituent Affairs, please rank the casework issues in the order in which they interest you (1=highest, 5-lowest)

Within outreach please check off all areas of interest

Constituent Affairs: _____

- Immigration and Foreign Affairs
- Veterans, Military, Service Academy Nominations, Taxes, Prisons, Postal Services, Civil Rights
- Healthcare, Social Security, Education, Social Services
- Labor, Small Business, Housing, Banking, Consumer Affairs, Environment, Transportation, Legal

Outreach: _____

- Economic Development
- Arts/Education
- LGBTQ
- Borough outreach
- Women
- Seniors
- Labor

Operations (Scheduling): _____

Press Office: _____
SECURITY QUESTIONS:

Please answer all questions in full candor and detail.

Have you ever had disciplinary or administrative actions (i.e. suspensions, probation, expulsion) been taken against you by your school or are any pending? Yes____ No____

Have you ever been charged with or convicted of any criminal offense, DWI/DUI, or misdemeanor offense? Yes____ No____

Have you ever used, possessed, supplied, or manufactured any illegal drugs? Yes____ No____

If you answered “Yes” to any of the above questions, please provide an explanation and include the dates of the actions on a separate page.

CERTIFICATION

“My statements on this form and any attachments to it, are true complete and correct to the best of my knowledge and belief and are made in good faith. I understand that knowingly giving false information will lead to the rejection of my application and/or immediate dismissal from the program”

______________________________________________  ______________
Signature                                             Date