2020 PAID INTERNSHIP PROGRAM

APPLICATION FORM

REQUIRED INFORMATION

NAME:

DATE OF BIRTH:

DATES AVAILABLE:

CHECK IF APPLICABLE

- ☐ FIRST GENERATION AMERICAN
- ☐ FIRST GENERATION COLLEGE STUDENT
- ☐ ELIGIBLE FOR PELL GRANT

ESSAY QUESTION

From a financial standpoint, what impact would being offered a paid internship have on your education and future goals?

Please submit this form along with attached Essay Question to:
FL09.interns@mail.house.gov

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