



Internship Application

Contact Informat	ion			
First:	Middle:		Last :	
E-mail Address:	·		Date of Birth:	
Phone Number:		Cell Phone N	lumber:	
Current Address				
Street/Box#:				
			Phone Number:	
Permanent Street	t Address (if d	lifferent)		
Street/Box#:				
			Phone Number:	
Emergency Conta	ct Informatio	n		
First:	Mide	dle:	Last :	
Street/Box#:				
City:	State:	Zip:	Relationship:	
E-mail Address:				
Phone Number:	Cell Number:			
Academic Inform	ation			
College/University Attending:			Major:	
			dit available for internships?: Yes No	
Applicant Inform	ation			
Check all that apply:	me/my family a	re OK-01 reside	nts: Yes No	
U.S. Citizen: Yes				
Which semester are		r?		
Preferred office loca				

Along with the application, please send the following:

- -Current Resume
- -Cover Letter
- -Questionnaire in a separate word doc, please answer the following questions (250 words maximum for each question)
 - 1. What do you hope to gain from working as a congressional intern in Congressman Hern's office?
 - 2. What is the role of the federal government?
 - 3. What issue facing America is most important to you and why?

Please send completed applications or any questions to the relevant Intern Coordinator:

Washington, DC Office

DC Intern Coordinator,
Attn: John Hornak - Intern Coordinator
John.Hornak@mail.house.gov
Phone: (202) 225-2211

Tulsa District Office

District Intern Coordinator,
Attn: Madison Johnston - Intern Coordinator
madison.johnston@mail.house.gov
Phone: (918) 935-3222

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

Signature	Date:	