



# District of Columbia Courts Internship Application

Name:		Phone Number:
Address (Street, City, State):		
Social Security Number:	Place of Birth (optional):	
E-mail address:	Date of Birth (optional):	
University:	Major:	
Date:	Start Date:	
How did you hear about the Courts Internship Program?		
Are you related to any Court employee? (if yes, whom)		
Position(s) you're interested in are:		
Please list any relevant training, skills, and qualifications:		
Why are you interested in interning/volunteering at the Courts?		
What experience do you have working with the public?		
Expected work schedule:		
I, the undersigned, certify that the information provided in this application is true and complete to the best of my knowledge. I understand that, should any statement I have made prove to be false, it may result in the rejection of my application or in my discharge from the District of Columbia Courts.		
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature		<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date
Please send all applications to: <div style="text-align: center; margin-top: 10px;"> <p>Meghan M. Aberle            Intern Volunteer Coordinator            515 5<sup>th</sup> Street, NW            Washington, D.C. 20001</p> <p>(202) 626-3290 (telephone) ☐ (202) 879-4212 (fax)</p> </div>		