



San Mateo County Republican Party

University Intern Program Application

Name: _____ Date of Birth: _____

University: _____ Year in School: _____

Major: _____ Minor: _____

Current Mailing Address: _____

Phone: _____ Email: _____

Please list the times you are available to work each day. If you cannot work, enter "N/A":

Mon: _____ Time Available: _____

Tues: _____ Time Available: _____

Wed: _____ Time Available: _____

Thur: _____ Time Available: _____

Fri: _____ Time Available: _____

Please rank your interest in the following areas (1 is most interested and 5 is least interested):

____ Political ____ Communications ____ Digital Media ____ Member Services ____ Finance

Are you planning to receive college credit for your internship? Yes No

Please answer each of the following four questions:

1. Why are you a Republican?
2. Why are you interested in an internship with the SMGOP and what would you like to gain from the experience?
3. Who is your Republican role model and why?
4. Tell us something about yourself not on your resume:

By signing below, I certify that the information provided above is correct to the best of my knowledge. I understand any misrepresentation herein can be grounds for immediate disqualification of candidacy to the SMGOP internship program.

Signature

Date