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Little Rock, Arkansas 72207  
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COMMITTEE ON ARMED SERVICES  
COMMITTEE ON VETERANS' AFFAIRS

snyder.congress@mail.house.gov

web: www.house.gov/snyder

## U.S. Representative Vic Snyder Internship Application

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

### Home Contact Information

Parents Names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

### College/University Contact Information

Name of School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### School Classification:

Freshman  Sophomore  Junior  Senior  Grad School  Law School

Major: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

Anticipated Date of Graduation: \_\_\_\_\_

Are you willing to take an unpaid internship? Yes \_\_\_\_\_ No \_\_\_\_\_

Where are you interested in working during your internship?

Washington D.C. \_\_\_\_\_ Little Rock \_\_\_\_\_ Either \_\_\_\_\_

What dates will you be available to serve as an intern?

\_\_\_\_\_

What month do you prefer?

\_\_\_\_\_ May \_\_\_\_\_ June \_\_\_\_\_ July \_\_\_\_\_ August

\_\_\_\_\_ Fall Semester \_\_\_\_\_ Spring Semester

Is this internship for academic credit? Yes \_\_\_\_\_ No \_\_\_\_\_

*If so:* Name of supervising professor: \_\_\_\_\_

Telephone number of supervising professor: \_\_\_\_\_

What do you wish to gain from your experience as a congressional intern?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What federal issues interest you most?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

*To complete the application packet these items must be included:*

\_\_\_ Completed application form \_\_\_ Current resume \_\_\_ 3 letters of reference