



DCCDA Internship Program

Internship Program

CONFIDENTIAL

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code*

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____

Social Security Number or Government ID: _____

Birth Date: _____ Marital Status: _____

Spouses Full Name: _____

Applicant Employer: _____ Applicant Work Phone: () _____

College/University/Law School Information

College, University or Law School: _____ Current Major or Level: _____

Sponsor or Professor: _____ Department: _____

Address: _____ E-mail: _____

Work Phone: () _____ Cell Phone: () _____

Tentative Start Date: _____ Work Days & Hours: _____

Emergency Contact Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* _____ *State* _____ *ZIP Code*

Primary Phone: () _____ Alternate Phone: () _____

Relationship: _____

CONFIDENTIAL

DATE COMPLETED:

**Attach additional history to this document (written or typed).*

Legal Work History

Firm Name or Individual:

Last _____ *First* _____ *M.I.* _____

Address:

Street Address _____ *Position* _____

City _____ *State* _____ *ZIP Code* _____

Office Phone: () _____ Dates of Employment: _____

Firm Name or Individual:

Last _____ *First* _____ *M.I.* _____

Address:

Street Address _____ *Position* _____

City _____ *State* _____ *ZIP Code* _____

Office Phone: () _____ Dates of Employment: _____

*Please list all cases disposed by final adjudication, dismissal or pending for you or any relative, close associate or employer.

*Please indicate Criminal or Civil by circling or labeling **CR** (criminal) or **CI** (Civil).

Criminal or Civil Litigation

Criminal or Civil Case(s): _____ **v.** _____ Date of Incident or Filing: _____
County, State, Federal Court of Case or Filing & Case Number:

Criminal or Civil Case(s): _____ **v.** _____ Date of Incident or Filing: _____
County, State, Federal Court of Case or Filing & Case Number:

Criminal or Civil Case(s): _____ **v.** _____ Date of Incident or Filing: _____
County, State, Federal Court of Case or Filing & Case Number: