

STATE OF UTAH OFFICE OF THE UTAH ATTORNEY GENERAL

INTERNSHIP APPLICATION

- 1. All applicants must submit a complete application packet by the appropriate deadline for the sought internship session. Please include:
 - Cover Letter
 - Internship Application
 - Current Resume, including three references
 - Two Letters of Recommendation (May be submitted separately if sent from recommenders)
 - Current **Official** Transcript(s) from all universities or colleges previously attended and currently attending (high school transcripts are not necessary)
 - Three-page Writing Sample (May be on any topic. May be a previously-written paper.)
- 2. The application packet may be submitted by U.S. Mail, facsimile, or as a PDF attachment in an email.
 - Applications may be faxed to (801) 538-1121 ATTN: Clerk Program Coordinator or mailed to Intern Program

Office of the Attorney General

ATTN: Clerk Program Coordinator

5272 S College Drive, Suite 200

Murray, UT 84123

- Applications may be emailed as a PDF attachment to CPC@agutah.gov. Subject line should please read "Internship Application."
- 3. Incomplete applications will not be considered. Please review your items thoroughly prior to submission.

**Note: Please be aware that the Office conducts a background check on all applicants. By submitting this application, you authorize the Office of the Attorney General to conduct a preliminary background screening for work purposes.

PERSONAL INFORMATION
Full Name:
College Resident Address:
Permanent Address:
Email Address:
Phone number(s) at which you can be easily reached:
Resident of Utah?
Date of Birth:
AVAILABILITY
Please indicate the term in which you are interested.
☐ Winter/Legislative Session (Generally January-March)
Summer (Generally May-August)
Fall (Generally September-December)
Are you available to work at least 20 <u>in-office</u> hours a week? Yes No We do not allow interns to work remotely or on evenings or weekends.
If no, please state how many hours you are available per week
Please indicate your availability:
Monday:
Tuesday:
Wednesday:
Thursday:
Friday:

EDUCATION INFORMATION	<u>ON</u>	
Current College or University (Name, City State):	
Expected Graduation Date:		
Major:	Minor:	
·	redit for your Internship: Yes e academic credit for your internsh	☐ No ip, you must arrange this with
Advisor's Telephone #:		
Number of Hours you must o	complete for credit:	
Hours per week you must wo	ork for credit:	
Placement deadline:		
divisions which hold the most divisions, but we will do what website. Civil EducationEnvironment & HealthHighways & UtilitiesLitigationNatural Resources	cammer and Fall Internships Only st interest for you. We cannot guara at we can. For more information on Criminal Child Protection Child & Family Support Investigations (for law enforcement applicants) Justice White Collar & Commercial E	Appeals Civil AppealsCriminal Appeals
SKILLS & ABILITIES (ch	eck the appropriate areas)	
Computer knowledge: Microsoft Word Microsoft Excel PowerPoint Internet Research HTML	Legal Knowledge: Writing Legal Research Briefs Draft Pleadings Westlaw Lexis/Nexis	General: Public Speaking Bilingual Typing wpm

	AND NARRATIVE INFORMATION
	e space below to answer the questions. Please do not attach additional sheets to answer questions. o you want an internship placement with the Utah Attorney General's Office?
Please	state why you would be a good representative of the Utah Attorney General's Office:
What v	vould you contribute to the Intern Program?
What d	o you consider your most significant accomplishment? Why?
INDIC	SE CAREFULLY READ THE FOLLOWING STATEMENTS CAREFULLY AND CATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING THE E PROVIDED.
1.	I understand that I am applying for an unpaid internship.
2.	I hereby certify that the statements on this application, as well as those on any attachment(s) to this form, are to the best of my knowledge true and correct and that they are all given of my own free will. I agree that any misstatement(s) or omission(s) as to material facts will lead to the rejection of my application and/or immediate dismissal from the program.
3.	I authorize you to communicate with my former employers, schools, officials and persons named as references. I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.
4.	I understand that the action of submitting this application gives my permission to the Office of the Attorney General to conduct a preliminary background screening for work purposes.

Date

Applicant's Signature