

C O N G R E S S M A N
David Vitter



**Internship Application
Congressman David Vitter**

Note: Internships in Congressman Vitter's office are unpaid

Name: _____ Date: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Telephone: (____) _____ FAX: (____) _____

E-Mail Address: _____

Education:

Colleges and Universities Attended:

Name: _____

City: _____ State: _____

Major: _____ Year in School: _____

Work History:

Employer: _____

Job Title: _____

City: _____ State: _____

Supervisor: _____ Telephone: (____) _____

References:

Name: _____

Phone: (____) _____

Address: _____

City: _____ State: _____ ZIP: _____

Name: _____

Phone: (____) _____

Address: _____

City: _____ State: _____ ZIP: _____

Name: _____

Phone: (____) _____

Address: _____

City: _____ State: _____ ZIP: _____