



# College Intern Application

Print legibly or type unless otherwise noted.  
Please note: all internships are UNPAID.

## Part I: Applicant Information

1. Name:  
 Home Address:  
 City/Town: State: Zip Code:  
 Home Phone: Cell Phone:  
 E-mail Address:

2. College/University Name:  
 Address:  
 City/Town: State: Zip Code:

3. Address to where notification letter should be sent:  Home  School

## Part II: Field of Study Information

1. Field of Study:  
 2. Expected Graduation Date:  
 3. Course Instructor Name: Instructor Title:  
 Course Instructor Phone:  
 4. Current level:  Junior  Senior  Master's Program  
 5. Please identify areas of interest:  
 Chemistry & Physical Sciences  Environmental Studies  Environmental Engineering  
 Public & Environmental Policy  Information Technology  Mechanical Engineering  
 Geographic Information Systems (GIS)  Civil Engineering  
 Other Physical or Biological Sciences, Geology, Ecology, Wildlife, Fisheries Biology, etc.  
 Describe:

## Part III: Intern Information

1. Please attach 1) a list all coursework, directly relevant to the content of this internship, completed prior to beginning this internship and 2) a current resume.

2. How much time are you required to commit to this internship? hours per week

3. Expected dates of participation(MM/DD/YY): Beginning Date: End Date:

4. Do you have a driver's license?  Yes  No License Number:

5. Would you be willing to travel to various field locations?  Yes  No

6. Are you fluent in a language(s) other than English?  Yes  No  
 If yes, specify language(s):

## Part IV: Optional Information

We are requesting that you voluntarily supply the following information.

1. Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female		
2. Ethnicity:	<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian or Pacific Islander
	<input type="checkbox"/> American Indian or Native Alaskan	<input type="checkbox"/> Other		

## Part V: Application Certification

The applicant must sign this part. An application will be considered incomplete unless the required signature is provided.

"I certify that the information on this application is correct. I authorize the Department of Environmental Protection (DEP) to call my course instructor to obtain information pertinent to my responsibilities as an intern at the DEP. I agree to abide by the policies, directives and laws of the DEP. I understand that the first month is a trial period, for both DEP and myself, to see if my experience is a good match for all parties concerned."	
Signature of Applicant	Date
Name of Applicant (print or type)	Title (if applicable)

Note: Please submit completed Student Intern Application Form to:

AFFIRMATIVE ACTION OFFICE  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127  
E-MAIL: [DEP.AAOFFICE@CT.GOV](mailto:DEP.AAOFFICE@CT.GOV)

The DEP is an affirmative action/equal opportunity employer, providing programs and services in a fair and impartial manner. In conformance with the Americans with Disabilities Act, DEP makes every effort to provide equally effective services for persons with disabilities. If you have any special needs/requirements in order to participate in an internship opportunity with the DEP, please contact Marcia Z. Bonito, Affirmative Action Office, at (860) 424-3051.

### OFFICE USE ONLY

1. Job Location:	
2. Position:	
3. Date Interviewed:	
4. Accepted: <input type="checkbox"/> Yes	If yes, list Date Accepted: _____
<input type="checkbox"/> A – Education inadequate	<input type="checkbox"/> C – Communication Skills inadequate
<input type="checkbox"/> B – Experience inadequate	<input type="checkbox"/> D – Failure to respond or keep appointment
	<input type="checkbox"/> E – Other: Specify: _____
Name of Interviewer:	Title: