



OFFICE OF THE ATTORNEY GENERAL INTERN APPLICATION

Applicants must submit a résumé, current transcript(s), and a cover letter with this application.

PERSONAL INFORMATION

Name:

Last First Middle

Current

Address:

Street City State Zip Code

Permanent

Address:

Street City State Zip Code

Telephone

Number:

Driver's

License:

State DL Number

E-Mail:

Do you have any relatives who work for the Office of the Attorney General?

☐ Yes

☐ No

If yes, identify name(s) and relationship(s):

U.S. Military Service?

☐ Yes ☐ No

From date: _____ To date: _____

Have you ever been convicted of a felony?

☐ Yes

☐ No

A pre-employment criminal background check is mandatory for all OAG positions, including employees, interns, and volunteers.

REQUESTED INTERNSHIP SCHEDULE

Date available to begin work: _____

Semester:

☐ Fall

☐ Spring

☐ Summer

Proposed internship schedule:

| | | |
|------------------------------------|------------------|----------------|
| <input type="checkbox"/> Monday | Start time _____ | End time _____ |
| <input type="checkbox"/> Tuesday | Start time _____ | End time _____ |
| <input type="checkbox"/> Wednesday | Start time _____ | End time _____ |
| <input type="checkbox"/> Thursday | Start time _____ | End time _____ |
| <input type="checkbox"/> Friday | Start time _____ | End time _____ |

Current status: ☐ Full-time Student ☐ Part-time Student

Cumulative GPA: _____ (based on a GPA scale of _____). Class rank: _____ out of _____

Are you seeking academic credit for your internship?: ☐ No ☐ Yes (details identified below):

Advisor: _____

Advisor's telephone number: _____

Total number of internship
hours required for credit: _____

Internship hours per week
required for credit: _____

Placement deadline: _____

EDUCATION

| College/Universities/ Technical Schools | Dates Attended From / To | | | | Hours Completed | Graduated (yes/no) | Degree |
|--|-----------------------------|--|--|--|--------------------|-----------------------|--------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

CLASSIFICATION

☐ Undergraduate Status: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

☐ Graduate Status: ☐ 1st Year ☐ 2nd Year ☐ 3rd+ Year

☐ Legal Assistant/Paralegal certification: ☐ Currently enrolled ☐ Course work completed

☐ Other (Explain): _____

SKILLS & ABILITIES (check the appropriate areas)

Computer knowledge:

- ☐ Microsoft Word
- ☐ Microsoft Excel
- ☐ Microsoft Outlook
- ☐ Microsoft PowerPoint
- ☐ Internet Research
- ☐ HTML

Legal Knowledge:

- ☐ Legal Writing
- ☐ Legal Research
- ☐ Brief Writing
- ☐ Drafting Pleadings
- ☐ Westlaw
- ☐ Lexis

General:

- ☐ Public Speaking
- ☐ Foreign Language(s)
- ☐ Typing _____ wpm

EXPERIENCE & INVOLVEMENT

Describe what you expect to gain from an internship at the Office of the Attorney General.

Identify any experience(s) you have had that could benefit you in an internship.

Identify any honors or awards you have received.

Identify your community involvement (e.g., volunteer or public service).

PROFESSIONAL OR PERSONAL REFERENCES

| Name | Address | Telephone | Relationship |
|------|---------|-----------|--------------|
|------|---------|-----------|--------------|

EMERGENCY CONTACT

Name: _____ Relationship: _____

Address: _____

Telephone number: _____

How did you hear about the OAG Volunteer Intern Program?

- ☐ Office of the Attorney General website
 - ☐ Career Fair
 - ☐ College or University Placement Center/Career Services
 - ☐ Professor
 - ☐ Fellow student
 - ☐ Other (please specify)
-

List your divisions in order of preference. Final placement will depend upon division workloads and staffing needs. For more information on the divisions, click [here](#).

- 1: _____
- 2: _____
- 3: _____
- 4: _____

BY SUBMITTING YOUR APPLICATION ELECTRONICALLY, YOU ARE INDICATING YOUR UNDERSTANDING AND ACCEPTANCE OF THE FOLLOWING:

1. I hereby certify that the statements in this application, as well as those on any attachment(s) to this form, are to the best of my knowledge, true and correct. I agree that any misstatement(s) or omission(s) as to material facts will constitute grounds for unfavorable consideration or dismissal from the agency.
2. I authorize the OAG to communicate with any former employer, school, official, or reference. I hereby release all employers, schools, and individuals from any liability for any damage whatsoever resulting from giving information about me.
3. I understand that all candidates for positions at the OAG are subject to a criminal background check.

For mailed-in applications, sign here to acknowledge understanding and acceptance of these statements.

Signature

Date

Email your application to the Law Clerk and Intern Coordinator
Loretta.Aranda@texasattorneygeneral.gov