

South Carolina Republican Party
Internship Program for Undergraduate/Graduate Students
APPLICATION

Name:

Date of Birth:

University:

Year in School:

College Major:

Minor:

Current Mailing Address:

Phone:

E-mail:

Please list the times you are available to work each day. If you cannot work a certain day, but "N/A"

M:

T:

W:

T:

F:

Please rank your interest in the following departments: 1 is most interested and 5 is least interested.

Political Communications Design/Multimedia Member Services Finance

Are you planning to receive college credit for your internship ? Y N

Please answer each of the four following questions in 150 words or less:

- 1) Why are you a Republican?
- 2) Why are you interested in interning at the SCGOP and what do you hope to gain from the experience?
- 3) Who is your Republican role model and why?
- 4) Tell us something about yourself that is not on your resume.

By signing below, I certify that all of the above information is correct to the best of my knowledge. I understand that any misrepresentation herein can be grounds for immediate disqualification of candidacy to the SCGOP internship program.

Signature:

Date: