

**City, County and Local Government Law Section
Student Internship Program Application**

1. Attorney's Office:
Address:
Contact Person:
Telephone number:
Fax number:
E-mail:

2. Type of Student Internship:

Law School ___
College ___

3. Dates of Internship:

4. Please describe the types of activities, duties, events, etc. that the intern will perform or in which the intern will participate:

5. Amount of funds requested (include number of interns and amount per intern):

6. Please state the name and title of the person who will be responsible for supervising the intern:

7. Describe how the internship will help enhance the student's educational experience in the area of local government law:

8. Signature of person authorized to make application and date:

Signature

Title

Date: _____