Florida Summer Internship Program

Application Deadline: June 6th, 2020

APAPA’s Florida Internship Program in Florida is designed to prepare college students to become future leaders in the State of Florida. This program provides an opportunity for students to develop their leadership skills, gain public policy experience and become civically engaged.

The internship program will develop:

- Political awareness and civic engagement
- Understanding of government and legislative processes
- Professional and leadership qualities
- Teamwork skills
- Networking skills with other fellow interns

Eligibility
The program is open to all high school senior, undergraduate and graduate college students

Program length and stipend
- Orientation will be held online video conference on June 3, 2020.
- The whole program runs from June 3, 2020 through July 31, 2020 with combination of online training, field training and community services (based on the coordinated schedule).
- Online projects led or involved by government offices such as census outreach, voter registration, projects in response to COVID-19 Pandemic, for information sharing and mobilizing API community, media development, Federal/state/local government engagement projects etc.
- Interns will receive a stipend for successful completion of the program. Students are responsible for their own housing, transportation and insurance.

Requirements

- Work in your assigned office. The hours are flexible depending on the placement office and must be distributed over the period of time.
- Be available to attend on-line workshops, field training and community service. Workshops include leadership training, public speaking, voter’s registration, personal finance, project assignments.

Deadline
Application materials are due by May 31, 2020
Applicants will be notified of our decision by June 1, 2020

** All documents or questions, please Email to – APAPACFC@gmail.com **
APAPA Internship Application

♦ Please complete this form and prepare a Personal Statement. When completed, please Email the documents to – APAPACFC@gmail.com

♦ GENERAL INFORMATION

Name: Last                                                                 First                                                                 Middle initial
Gender: ☐ Female ☐ Male
Date of Birth: / / Place of Birth: ________________________________
Month Day Year

Driver’s license (State, #) ____________________________________________

Citizenship status: ☐ U.S. citizen ☐ Permanent resident

Current Address:
Street                                                                   City                                                                   State/ZIP

Current Phone: ( ) Effective until: / / ________________________________
Month Day Year

Alternate contact #: (_____)__________________________________________
(i.e. cell phone, voice mail, pager, work, etc.)

Personal Email Address: _____________________________________________

Permanent Address:
Street                                                                   City                                                                   State/ZIP

Permanent Phone: (_____)__________________________________________
Fax (if available): __________________________________________

♦ EMERGENCY CONTACT INFORMATION

Name: ____________________________ Relationship __________________________

Address:
Street                                                                   City                                                                   State/Zip

Home phone: (_____)________________________________________
Work phone: (_____)________________________________________
EDUCATIONAL BACKGROUND

College name: ____________________________ Location: ____________________________

Degree seeking: ____________________________ Major/minor: ____________________________

Current class year: ____________________________ Overall GPA: __________ Expected graduation date: __________

PERSONAL STATEMENT

Please write a statement addressing the following. The statement must not be longer than 2 pages in length.

- Your background
- Community and public service involvement
- Academic and Career goals
- Future plan in public service and/or politics and government involvement

STUDENT CERTIFICATION

- I understand that I hold APAPA, APAPA CFC, their boards and members, and employees harmless from any and all liability or claims which may arise out of, or occur, in connection with my participation in this program.
- I understand that this application, plus all accompanying documents, become the property of APAPA and will be shown to potential supervisors of my internship.
- I certify that the information I submitted on this application is accurate to the best of my knowledge. I also understand that I will be liable for all costs that APAPA may incur as the result of any misrepresentation, omission, or willful inaccuracy that I include on this application.
- During my internship, I understand that I am responsible for any and all travel, housing, living and medical expenses that may be incurred. I am responsible either personally or through my insurance coverage.
- I also understand that APAPA and APAPA CFC are not responsible for the theft of or damage to, my personal property.
- If selected, I promise to complete all program requirements in the office I am assigned to and submit a final journal reflecting my internship experience.

Name of applicant (please print) __________________________________ Signature ____________________________ Date ____________________________