

DIVISION OF LAW

STATE OF NEW JERSEY



Internship Application for Law Students

INTERNSHIP PROGRAM

Name: _____ Date: _____

E-mail: _____

Current address: _____

Telephone: _____ (please include area code) County: _____

Permanent address: _____

(if different) _____

Telephone: _____ (please include area code) County: _____

Law school currently enrolled in: _____

Expected year of graduation: _____

Expected status at beginning of internship: (Check one)

(Summer applicants should circle their status for the fall term following the internship)

___ 1st year ___ 2nd year ___ 3rd year ___ 4th year

Do you plan on receiving credit for your internship? ___ Yes ___ No

If "Yes," please identify:

Date available? _____

Have you applied for an internship at the Division of Law before? ___ Yes ___ No

If "Yes," did you have an interview? ___ Yes ___ No

Please list the sections you would like to work with: (Visit: <http://www.nj.gov/oag/law/sections.htm>)

1. _____ 2. _____ 3. _____

Location preference: (Check one) ___ Newark ___ Trenton ___ Voorhees

Do you plan on applying for a grant or other funding source? ___ Yes ___ No

With this application, please include: 1) a cover letter, 2) a resume, 3) a brief writing sample, and 4) a school transcript.

I hereby certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief.

Please address your submission to:

For Newark -

Darlene Lapola, Deputy Attorney General
Attn: DOL Internship
124 Halsey Street
P.O. Box 45029
Newark, NJ 07101
(973) 648-2975

For Trenton and Voorhees -

Philip J. Espinosa, Deputy Attorney General
Attn: DOL Internship
P.O. Box 114
Trenton, NJ 08625
(609) 292-4254
Fax: 609-292-5649

Signature: _____ Date: _____