

Phone Number:

**Email Address:** 

# **Boulder District Attorney,**

### **20th Judicial District**

# **Pre-Law Undergraduate Internship Application**

# Applicant Information Full Name First Name: Middle Initial: Last Name: Home Address Street Address: Apartment/Unit #: City: State: Zip: Contact Information

Are you available Decem	ber 1, 2024 through May	γ 5, 2025? If not, please ε	explain: (300 character limit)
		or each day of the week	
		Please put in the format e end time would be 3:00	
Weekday	Available	Start Time	End time
Monday	Available	Start Time	Liid tiille
Tuesday			
Wednesday			
Thursday			
Friday			
Applicant's Education  College / University Info	rmation		
Name of College or Univ	ersity:		
Address (City and	State):		
Degree or Field of	Study:		
Year of Study:			
Freshman:			
Sophomore:			
Junior:			
Senior:			
Graduate:			

## **Additional Information**

<ol> <li>How did you learn about internship opportunity any of the selections:</li> </ol>	ortunities at the Boulder DA's Office? Check
Friends:	
Family:	
Boulder County Website:	
Boulder County District Attorney Office Website:	
College or University Instructor:	
College or University:	Name:
Other:	Specify:
2. Are you proficient with computer use? Vin? (300 character limit)	What programs/applications are you proficient
3. Describe your work style. (400 character	limit)

4. V	What interests you about this internship? Which areas of the office interest you most? (300 character lit)
5.	Will this internship be part of a college credit program?  Yes No
6.	Describe how an internship at the Boulder DA's Office fits in with your educational, career or other life goals: (400 character limit)
7.	Please list any applicable coursework, volunteer, and work experience: (400 character limit)

8. Are you a defendant, witness, or victim in any criminal or civil case? If you answered, yes, please explain.
9. Are you currently using any marijuana/cannabis?
Yes No No
10. Are you willing to complete a background check to include being fingerprinted?
Yes No No
11. Please include a cover letter with your application.
Disclosure and Signature
I certify that my answers are true and complete to the best of my knowledge.
If this application leads to an internship, I understand that false or misleading information in my application or interview may result in my release.
Signature:
Date:

If you are filling out the application on a publicly accessible computer then save and send the filled application back to the District Attorney Office email (boulderda@bouldercounty.gov) along with your cover letter. If you are filling the form on your personal computer click the submit button and also make sure you attach your cover letter.