



The University of Mississippi's **WASHINGTON INTERNSHIP EXPERIENCE**



Bridging the gap between your academic training and your professional future

The students who participate in The University of Mississippi's **Washington Internship Experience (WIE)** will live and work in Washington, DC, widely regarded as the political capital of the world and the center of government and commerce. In addition to its magnificent federal structures and national monuments, Washington is a lively cultural center with a rich mix of art, music, and theater. Washington's dynamic professional environment and vibrant multicultural atmosphere offer students a vast array of opportunities to expand their career, academic, and personal goals.

To be eligible, students must be enrolled full-time at The University of Mississippi as a degree-seeking student. Students should be juniors or seniors at the time of their participation. Preference is given to students with a minimum 3.0 grade point average. Participants should be highly motivated, reliable, and adaptable. They must also possess strong written and oral communication skills.

This unique experience is valuable for students in all majors. There are career opportunities available for students majoring in journalism, education, business, engineering, biology, art, criminal justice, public policy, as well as international affairs and political science.

Please submit the following items with your completed application to The University of Mississippi's Washington Internship Experience (WIE) Coordinator Mary Leach.

- _____ **Transcript:** Attach a copy of your most recent, complete transcript.
- _____ **Cover Letter/Letter of Introduction:** In a one-page letter, describe how UM-WIE fits within your goals and experience.
- _____ **Résumé:** Attach a résumé which highlights your education and experience.
(Students interested in employment with federal agencies are encouraged to follow the federal résumé format.)
- _____ **Personal Statement:** Attach a one page statement (12 point Times Roman font; single spaced; 1" margins) which describes your interest in participating in The University of Mississippi's Washington Internship Experience and what you believe to be the benefits of your participation.
- _____ **Writing Sample:** Attach a copy of a 3 to 5-page writing assignment (i.e. essay, report, research paper, etc.) that you submitted as a course assignment, free of marks and/or grades from professors.
- _____ **Letters of Recommendation:** Ask your advisor or a faculty member *and* two former employers to complete the reference form and return it to the University of Mississippi's Washington Internship Experience Coordinator.
- _____ **Application Fee:** The application fee is \$50. This fee is not refundable and will be charged to your Bursar account. By submitting this application, you understand that you are obligated to pay this fee regardless of future circumstances.

The selection process is competitive, and a completed application does not guarantee the applicant selection to the program. Upon reviewing the applications, a campus committee will select several candidates to be interviewed for the positions available.

DEADLINES:

- Fall:** May 1, 2008
- Spring:** September 15, 2008
- Summer:** January 31, 2009

APPLICATION FOR ADMISSION



for The University of Mississippi's WASHINGTON INTERNSHIP EXPERIENCE



Please provide the following information. Please type or print in blue or black ink.

Name of Applicant: Last _____ First _____ Middle _____

Term applied for: Fall Spring Summer: Summer I Summer II Summer Full

Date of Birth: ____/____/____ SSN: _____ Gender: Male Female

Citizenship:

US Citizen US Permanent Resident Non-Citizen Visa or Permanent Resident # _____

Under Title VI of the Civil Rights Act of 1964, we are required to ask the following question of U.S. citizens and permanent residents. Answers will not affect our admissions decisions. Your cooperation is requested and appreciated.

How do you describe yourself? Mark all that apply (optional):

Race / Ethnicity: White (not of Hispanic origin) Black (not of Hispanic origin)
 Hispanic Asian, or Pacific Islander
 American Indian or Alaskan Native Other _____

Local Address:

Street _____ Apt./Box No. _____ City _____ State _____ ZIP _____

Permanent Address:

Street _____ Apt./Box No. _____ City _____ State _____ ZIP _____

Primary Phone: (____) _____-____ **Secondary/Cell Phone:** (____) _____-____

Email address(es): _____

Emergency Contact:

Name _____ Telephone Number (____) _____ Relationship _____

Classification: Sophomore Junior Senior Graduate Student ID Number _____

Major(s): _____ **Minor(s):** _____

Academic Advisor: _____

Cumulative GPA: _____ **Major GPA:** _____ **Residency Status:** In State Out of State
(Most recent transcript must be attached)

Are you eligible for Work Study? Yes No

Do you receive other financial aid/scholarship awards? Yes No

Please list: _____

Applicant's Signature _____ Date _____

Departmental Chairperson's Signature _____ Date _____

ACADEMIC REFERENCE FORM



for The University of Mississippi's WASHINGTON INTERNSHIP EXPERIENCE



Student Applicant's Name _____

Telephone Number: (_____) _____-_____ Email Address: _____

The above-named applicant is applying to The University of Mississippi's Washington Internship Experience. This program combines academic coursework with an internship. Admission to the UM-WIE is highly competitive and your letter of recommendation is very important in helping us to make an admission decision regarding this student. Please complete the following information and return it Mary Leach, UM-WIE Coordinator. This candidate's application will not be reviewed until we receive this form.

1. How long have you known the applicant? In what capacity?

Duration

Since _____

- Continuous Contact
- Infrequent Contact
- No Contact Since _____
- Only through Records

Capacity

- Student in large class/lecture
- Student in small class/seminar
- Advisee
- Interviewee
- Employee

2. Describe the applicant as a student.

Assessment

- Excellent Student
- Above average student
- Average student
- Below average student
- Insufficient record to judge

3. How would you rate the student's oral and written communication skills?

Oral Skills

- Excellent
- Above average
- Average
- Below average* *(Please comment)*

 Unknown

Written Skills

- Excellent
- Above-average
- Average
- Below average* *(Please comment)*

 Unknown

Basis of Assessment

- Coursework
- Review of writing
- Interview
- Reports of Others
- Personal Interaction

4. Will the student be motivated in his or her studies and work at the program site?

Assessment

- Highly motivated
- Adequately motivated
- Unmotivated* *(Please comment)*

 No basis for judgment

Basis of Assessment

- Direct knowledge
- Reports of others
- Records review

5. The student will be part of a program that lacks the structure of a typical college/university environment. Is the student self-reliant and mature enough to perform well in this type of program?

Self-reliance

- Very self-reliant
- Generally self-reliant
- Will require help* (*Please comment*)

Maturity

- Very mature
- Fairly mature
- Somewhat mature* (*Please comment*)
- No basis for judgment

Basis of assessment

- Personal knowledge
- Reports of others
- Records only

Reliability

- Very reliable
- Fairly reliable
- Somewhat reliable* (*Please comment*)

6. If you were the director of the applicant's proposed program, would you be eager to have this student as a participant? Why? Why not?

7. Please provide a brief statement about the student that addresses the student's strengths and weaknesses as they relate to the proposed off-campus study experience. Include your recommendation and any other information that you feel would be relevant to the application.

Signature

Date

Name (*please print*)

Title

Institution

Department

Address: Street

P.O./Campus Box

City

State

ZIP

(_____) _____ - _____
Phone

(_____) _____ - _____
Fax

Email Address

Return to the UM-WIE Coordinator:

Mary Leach
Program Coordinator
13 E. F. Yerby Conference Center
P.O. Box 879

The University of Mississippi
University, MS 38677-0879
Phone: (662) 915-7847; Fax: (662) 915-5138
Email: mleach@olemiss.edu

INFORMATION RELEASE FORM



for
**The University of Mississippi's
WASHINGTON
INTERNSHIP EXPERIENCE**



Name of Applicant *(please print)*

Address: Street

Apt./P.O. Box

City

State

ZIP

(_____) _____ - _____
Primary Phone

(_____) _____ - _____
Secondary/Cell Phone

Email

Below is a statement that must be signed by you and a parent/guardian if you are under eighteen years old. Please review the options carefully. Indicate the information that you grant The University of Mississippi's Washington Internship Experience permission to release to other program participants or to use in future publications.

I hereby grant The University of Mississippi permission to release the information checked below concerning my participation in the Washington Internship Experience. The information indicated below may be released to other participants in the program and may be released to future applicants and/or program participants.

- ALL OF THE FOLLOWING
- Local Address, Telephone Number
- Permanent Address, Telephone Number
- Email Address(es)
- College/University
- Major Area of Study
- Program of Participation
- Internship Placement Information (if applicable)

May we send your parents/guardians information about your participation in the program? Yes No

Name of Applicant

Name of Parent/Guardian

Signature

Signature

Date

Date

Address: Street

Apt./P.O. Box

City

State

ZIP

INTERNSHIP PREFERENCE FORM



for
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Numerically rank the type of internship you would accept were you admitted to the WIE Program. While you will be considered for internship placement ONLY with those areas you choose to rank, you must also agree to accept ANY internship placement. Additional information will be provided during the interview. Additional internships may also be available and we will work with you to find the best fit.

- _____ ARTS AND HUMANITIES
- _____ BUSINESS, FINANCE AND TECHNOLOGY
- _____ HEALTH AND MEDICINE
- _____ HUMAN RESOURCE
- _____ EDUCATION
- _____ GOVERNMENT AND POLITICS
- _____ INTERNATIONAL AFFAIRS
- _____ LEGAL SERVICES
- _____ MEDIA AFFAIRS, COMMUNICATION AND PUBLIC RELATIONS
- _____ NON-PROFITS
- _____ PUBLIC POLICY
- _____ SCIENCE AND THE ENVIRONMENT
- _____ SECURITY, INVESTIGATIONS AND LAW ENFORCEMENT
- _____ SOCIAL JUSTICE AND ISSUE ADVOCACY
- _____ TRADE ASSOCIATIONS

I, _____, hereby certify that I have personally completed this preference form. I understand that I may be assigned to intern at ANY provider. I agree to abide by the decision of the Internship Director regarding my placement should I be accepted into the WIE Program.

Signature

Date

