



# Riverside County District Attorney's Office Internship Application

INSTRUCTIONS: **ALL APPLICATIONS ARE DUE BY March 1st, 2025.**

Please type or print clearly and answer each question completely. Please attach your most recent resume with this application.

<b>1. Last Name:</b>		<b>2. First Name:</b>	
<b>3. Gender</b>	Male <input type="checkbox"/>	Female <input type="checkbox"/>	<b>4. Will you be 18 years of age or older at the time of the submission of this application? (circle) YES NO</b>
<b>5. Permanent address:</b>		Home Phone:	
		Cell Phone:	
		E-mail:	
<b>6. Education (University/College &amp; Location):</b>			<b>Current GPA:</b>
Attended from: (mm/yy)	Attended to: (mm/yy)	Degree Obtained/Expected	Major Subject of Study
<b>7. Volunteer Work/Clubs/Organizations:</b>			
<b>8. Career plans:</b>			
<b>9. Tell us something non-educational, non-career oriented about yourself:</b>			
<b>10. What personal characteristics of yours would be an asset to this internship?</b>			



<b>11. What is your purpose for joining this internship?</b>		
<b>12. Internship Availability:</b> Please give an indication of your dates and times of availability for an internship.		
Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____		
<i>*Program days are Tuesday &amp; Thursday 8am-5pm</i>		
<b>13. How did you hear about this internship?</b>		
<b>14. Have you applied for this internship program previously? If so, what year?</b>		
<b>15. Have you ever been arrested, indicted, or summoned into Court as a defendant in a criminal proceeding, or convicted, fined, or imprisoned for violation of any law (excluding minor traffic violations)?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, please give full details in an attached statement.		
<b>16. Contact person in case of emergency:</b>		
Name: _____		Relation to you: _____
Address _____		
Telephone: _____	(Daytime)	(Evening)
E-mail address: _____		
<b>17. References:</b>		
Please list at least two persons not related to you, who are familiar with your character and qualifications:		
Full name and title	Address	Business or occupation
_____	_____	_____
_____	_____	_____
<b>18. I CERTIFY</b> that the foregoing statements and answers are true, complete and correct to the best of my knowledge and belief.		
Signature _____		Date _____

*\* Please attach or include your most recent resume with this application.*

**E-mail your application and resume to: [CollegeAcademy@rivcoda.org](mailto:CollegeAcademy@rivcoda.org)**

**For questions, call or email:**

**(951) 955-5400/ [CollegeAcademy@rivcoda.org](mailto:CollegeAcademy@rivcoda.org)**