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**Spring 2020 Internship Application**

Student Legal Services (SLS) is an equal opportunity employer. Federal law prohibits discrimination because of race, color, religion, sex, nationality, origin and age, the law also requires affirmative action in the employment of women, minorities, the handicapped, disabled veterans, and veterans of the Vietnam Era. A description of SLS’s affirmative action program is available at the office of Affirmative Action, French Administration Building, upon request.

**CAREFULLY READ AND COMPLETE ALL SECTIONS OF THIS APPLICATION. AN INCOMPLETE APPLICATION WILL NOT BE REVIEWED.**

**Personal Information**

**Last Name First Name Middle Initial**

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**School Address City Zip Code\_ \_\_\_**

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**Permanent Address City Zip Code\_\_ \_\_**

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**Primary Telephone Alternate Telephone \_\_\_\_\_ \_\_\_\_\_\_\_**

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**Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_WSU ID#\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_**

**Major: Classification: GPA:\_\_\_\_\_\_\_\_**

**What form of internship are you currently seeking (credit, volunteer)?**

**\* If seeking credit, please specify the department you are seeking credit through.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Security Information: Background Check (CONFIDENTIAL)**

**Please provide accurate and complete information to the following questions. This information may or may not be taken into account in the hiring process. DO NOT include in response to any of the questions below: arrests without convictions, convictions for minor traffic offenses, or convictions or incarcerations for which a record has been sealed or expunged. ­Please note that a criminal record will not necessarily disqualify you from employment.**

**1. Have you ever been convicted of or pleaded guilty to a crime or other criminal offense? Include university conduct code violations, military services, etc.**

**\_\_\_\_\_\_Yes \_\_\_\_\_\_ NO**

**2. Are you currently on parole, probation, work release program, conditional releasing or serving a weekend sentence as a result of a conviction or guilty plea \_\_\_\_\_\_ Yes \_\_\_\_\_ No**

***If you answer “yes” to any of the questions above, please provide further details below for each situation.***

**1. Date, Location, Offense, Charge: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_\_**

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**2. Location of court or agency issuing sentence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3. If you have been in prison, please give name and location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4. Any other information you believe pertinent to our full understanding of this matter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Are you currently under indictment or are you currently a defendant in any criminal court proceeding? \_\_\_\_\_\_ Yes \_\_\_\_\_\_ No**

**If yes, please give the charge, date, and place or such indictment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**PLEASE READ CAREFULLY AND SIGN BELOW\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SLS MAY REQUEST A REPORT ON THE ABOVE INFORMATION. If you sign below you are authorizing SLS to obtain this report.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Applicant Date**

**SLS has my permission to verify any information stated above and if unfactual information is discovered SLS will not consider me for employment or if hired, will terminate my employment.**

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**Signature of Applicant Date**