Print Name		

Statement of Interest

Write a Statement of Interest that describes your objectives and motivations in seeking an internship with the U.S. Mission. Explain how the academic courses you have taken, and other personal experiences you have had, relate to the Intern Program and/or Office to which you would like to be assigned.

Be sure to indicate if YOU will be a continuing student immediately upon completion of your internship.

If this is not indicated, your application will not be considered.

UNITED STATES DEPARTMENT OF STATE GRATUITOUS SERVICE AGREEMENT

[This form should be maintained in Intern's OPF]

Title 5 Section 3111 of the United States Code authorizes federal agencies to establish programs designed to provide educationally related work assignments for students on a nonpayment basis. You will be hired under such a program. According to the law. we may only accept your gratuitous service if the service: (I) is performed by a student. with permission of the institution at which the student is enrolled; (2) is uncompensated; and (3) will not displace any employee.

As a student participating under this program you will not be considered to be a federal employee for any purposes other than injury compensation or laws related to the Tort Claims Act. Your service is not creditable for leave accrual or any other employee benefits.

This arrangement is subject to termination at any time at the discretion of the Mission.

Please sign below acknowledging that you understand the terms hired.	s under which you will be
Signature	Date
I understand the terms under which I am being hired, includin will not be compensated for the services that I provide.	g, without limitation, that I
Signature of Intern	



U.S. EMBASSY YEREVAN, ARMENIA APPLICATION FOR FOREIGN NATIONAL STUDENT INTERN PROGRAM

POSITION						
1. Position Title	2. Vacan	cy Announcement Num	nber			
PERS	ONAL INFORMATION					
3. Last Name(s) / Surnames	First Name Middle Nam					
4. Date of Birth (mm-dd-yyyy)	5. Place of Birth					
6. Current Address						
8. E-mail Address						
9. Your current citizenship:						
10. Do you have any claim to U.S. Citizenship?		No				
11. If hired, are there accommodations the Mission needs to provide so that you can perform all the essential functions and duties of the position? Yes No If yes, please explain						
12. What days are you available to work? Sunday Monday Tuesday Wednesday Thursday Friday Saturday						
13. Do any of your relatives that work for the U.S. Mission in Armenia? If yes, provide the details below. Yes No						
Name	Relationship	Agency, Position	n, and Location			

UNIVERSITY/SCHOOL/DUCATIONAL INSTITUTION For each institution you have attended, provide the following information in the space below.				
14. Name and full address of current institution:				
Dates attended (Month/Year)		Dip	loma/Deg	ree/Certificate:
Date received: Maj	or field of s	study:		
15. Name, title and telephone number of instructo				
CONTINUATION: ADDITIONAL INFORMATION (if app	olicable)			
16. Name and full address of current institution:				
Dates attended (Month/Year)	Dates attended (Month/Year) Diploma/Degree/Certificate:			
Date received:	_ Major fiel	ds of stud	dy:	
17. Name, title and telephone of instructor:				
18. List your languages, the appropriate competer language standards below. You may only identify				
Language Indicators				
Level I = Basic Knowledge	Level IV = Fluent			
Level II = Limited Knowledge		Level	V = Profe	ssional Translator / Interpreter
Level III = Good Working Knowledge				
Language	Speak	Read	Write	1

WORK EXPERIENCE				
Include all work experience, paid and voluntary. Start with your present or most recent work experience. When describing work, list specific duties/responsibilities and accomplishments.				
19. Job Title:				
From To (mm-dd-yyyy)	Salary in Local Currency (if any)	lours Per Week		
Employer's Name and Address Su	ervisor's Name and Contact Information			
Na	ne			
Pho	ne Number			
	nail Address			
May HR contact your current supervisor? Yes No				
Describe your major duties/responsibilities and accomplishme	nts			
Boothso your major addoctroponoismaco and accomplication				
Reason(s) for leaving				
20. Job Title:				
	Salary in Local Currency (if any)	lours Per Week		
From To To (mm-dd-yyyy)				
Employer's Name and Address Su	pervisor's Name and Contact Information			
Name				
Pho	Phone Number			
E-mail Address				
Describe your major duties/responsibilities and accomplishme	nts.			
Reason(s) for leaving (Do not write "N/A" or applicable)				
Reason(s) for leaving (Do not write 1974 of applicable)				

REFERENCES				
21. List three personal references who are not relatives or former supervisors who have knowledge of your work performance. HR will obtain your permission before contacting any references.				
Name Address		Telephone	Occupation	
		OLONATURE AND OFFICE	A TION	
SIGNATURE AND CERTIFICATION				
27. I understand that any information I give may be investigated and that a false statement may be grounds for non consideration or dismissal of my participation in the Intern Program, if I am selected. I understand that, if I am provisionally selected, an Embassy-required security certification is a prerequisite. I understand that, if I am provisionally selected, an Embassy-required medical examination and medical certification is a prerequisite. I consent to the release of information about my ability and fitness for the Intern Program by employers, schools, law enforcement agencies and other individuals and organizations to Embassy-authorized investigators and personnel. I certify that, to the best of my knowledge, all of my statements are true, complete, and made in good faith.				
Signature _		Date	(mm-dd-yyyy) <u> </u>	

CONTINUATION SHEET – WORK EXPERIENCE					
25. Job Title::					
From To To		Salary in Local Currency (if any)	Hours Per Week		
Employer's Name and Address	Supervisor's Name and Contact Information Name				
	Phone Number E-mail Address				
Describe your major duties/responsibilities and accomplishments.					
Reason(s) for leaving (Do not write "N/A" or applicable)					
CONTINUATION SHEET – WORK EXPERIENCE					
25. Job Title::					
From To (mm-dd-yyyy)		Salary in Local Currency (if any)	Hours Per Week		
Employer's Name and Address	Supe	Supervisor's Name and Contact Information			
	Name				
	Phone Number				
	E-mail Address				
Describe your major duties/responsibilities and accomplishments.					
Reason(s) for leaving (Do not write "N/A" or applicable)					