

Internship Application

Contact Inform	ation
Name	
E-mail address	
Address	
City	State Zip
Phone number	(555-555-5555)
Summer: June	ern for TWDB, which term/semester do you prefer? – Aug. OFall: Sept. – Dec. OSpring: Jan. – May ONo preference
Education	
Current school	
Major	
Hours completed	(hours)
Prior school (if ap	plicable)
Major	
Hours completed	(hours)
High school	
Year graduated	(уууу)
In what fields are yo	ou interested in interning?
Relevant courses an	d skills
Work/Voluntee	er/Internship Experience
Work/Voluntee	er/Internship #1
From	(mm/dd/yyyy) to (mm/dd/yyyy)
Supervisor's name	

Revised 3/12/25



Supervisor's phone number and email address	
Briefly describe your duties and responsibilities	
Reason for leaving	
	_
Work/Volunteer/Internship#2	
From (mm/dd/yyyy) to (mm/dd/yyyy)	
Supervisor's name	
Supervisor's phone number and email address	_
Briefly describe your duties and responsibilities	
Reason for leaving	_
Reference	
Name and title	
Relationship	
E-mail address	
Phone number	

Submit Application

When you are ready to submit your application be sure to send a copy via email to **HR@twdb.texas.gov**, and to attach a cover letter of interest, your current resume, a copy of transcript (unofficial), and at least one (1) academic or work reference prior to sending. Thank you for your interest in interning with the TWDB!