



Are you applying for this position through a school program? \_\_\_\_\_

If so, what school? \_\_\_\_\_

Will you be receiving any school credit for this position?

If receiving school credit please explain the program:

**\*\* Please attach any necessary paperwork to support your school credit or externship program.**

Have you previously applied, interviewed or worked in any capacity within this office or any other government agency (local, county, state or federal?) If yes, please provide details and attach a separate sheet if necessary.

Briefly explain why you are interested in an internship with the Office of the Kankakee County State's Attorney:

### **Driver License Information**

Do you possess a valid driver's license? Yes  No  State \_\_\_\_\_

Driver's License Number \_\_\_\_\_ Expiration

Date \_\_\_\_\_

Have you ever had your driving privileges suspended, revoked or canceled in any state?

Yes  No

If "Yes", list the state and explain:

### **Work & Volunteer History**

**(PLEASE ATTACH YOUR RESUME TO THIS APPLICATION)**

## Education

Are you currently enrolled as a student? \_\_\_\_\_ If yes where \_\_\_\_\_

Year in school: \_\_\_\_\_ Current GPA: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

List the schools you have attended along with the other information required.

	Name and Address of school	Years Completed	Dates Attended	Graduated? YES or NO
High School				
Colleges or Universities				
Law/Graduate School				

List other formal and special training courses that may be relevant to this position.

\_\_\_\_\_

List any foreign languages you speak and indicate your proficiency by placing an "X" in the appropriate space.

Language	Reading			Speaking			Understanding			Writing		
	Exc	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc	Good	Fair

\_\_\_\_\_

Indicate special computer skills or programs you may be proficient in.

\_\_\_\_\_

\_\_\_\_\_

**The following information is optional and in no way affects your internship opportunities. This information is in compliance with the U.S. Equal Employment Opportunity Commission and will only be used for statistical purposes:**

Sex: Female \_\_\_\_\_ Male \_\_\_\_\_

Racial or Ethnic Classification:

\_\_\_\_\_ White \_\_\_\_\_ Black or African American \_\_\_\_\_ Hispanic or Latino \_\_\_\_\_ Other

**List the days/hours you will be available to work between the hours of 8:30am – 4:30pm**

	Start time	End time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday bond court*		

*Please note that court is in session daily during the morning hours (9am—12pm); during the afternoon, court is usually only in session if there is a trial scheduled. Students desiring to maximize their courtroom time should keep this in mind.*

**Date you would like to begin your internship:** \_\_\_\_\_

**Date you expect to complete the internship:** \_\_\_\_\_

**IN WHAT AREA OF THE OFFICE WOULD YOU LIKE TO VOLUNTEER?**

Placement is based upon the needs of the office. We try to accommodate your areas of interest; however, that is not always possible and your assignment may change due to the changing needs of the office. Interns should be prepared to assist in any or all areas as needed.

**Please note your preference by ranking the following divisions from 1-5, with #1 being your strongest interest:**

- \_\_\_\_\_ Criminal Prosecutions Bureau
- \_\_\_\_\_ Government Relations / Civil Division
- \_\_\_\_\_ Victim & Witness Assistance Program (undergraduate, graduate and law students only)
- \_\_\_\_\_ Traffic Prosecutions (must be 711 eligible/licensed)
- \_\_\_\_\_ DUI Prosecutions Division
- \_\_\_\_\_ Legislative/Legal Research (undergraduate, graduate and law students only)
- \_\_\_\_\_ Community Relations & Outreach
- \_\_\_\_\_ Paralegal (undergraduate and paralegal students only)
- \_\_\_\_\_ Other (please describe)

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# Release Form

Please read the following carefully before signing it as it contains terms and conditions that affect your application and potential internship.

1 **VERIFICATION:** I verify that all information I have provided both orally and in documentary form in connection with my application for a position with the Kankakee County State's Attorneys' Office is true and accurate. I understand that any false or misleading information I furnish in connection with my application for employment may cause my application to be rejected, any contingent offer of an internship to be rescinded, or if already interning in the office immediate termination, regardless of when discovered.

2 **AUTHORIZATION and RELEASE:** I authorize the Kankakee County State's Attorneys' Office to conduct a complete and thorough investigation of my qualifications for an internship including a security check. I release any and all persons and parties connected with any investigation from any and all claims or damages arising from the furnishing of information. I further understand that my offer of an internship and actual employment is contingent upon satisfactory results of such investigations. I further agree to provide my date of birth and social security number for the sole purpose of conducting background checks.

3 **INTERN-AT-WILL:** I understand and agree that my internship is terminable at will. Both the State's Attorneys' Office and I remain free to end our internship relationship at any time and for any reason. Further, I understand that nothing in any policies, manuals or similar documents creates an expressed or implied contract of employment.

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

\_\_\_\_\_  
DL NUMBER (if applicable) / ISSUING STATE

Contact in case of emergency:

\_\_\_\_\_  
Name/Address/Phone/Relation

**IF APPLICANT IS UNDER THE AGE OF 18 YEARS OLD:**

I, the parent/guardian of the above applicant, consent to the applicant making an application to the Kankakee County State's Attorneys' Office for an internship. I further consent to the above *Authorization & Release* and all other terms of this Application on behalf of the applicant. I further verify that all information provided in this application is true and accurate.

\_\_\_\_\_  
Print Parent/Guardian Name if applicant is under 18 years of age

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Parent/Guardian Telephone #

## **SOCIAL MEDIA POLICY FOR INTERNS & VOLUNTEERS**

The Kankakee County State's Attorneys' Office represents all the people of Kankakee County, and we take that responsibility very seriously. When you intern in the State's Attorneys' Office you are a reflection of this office, and your social media activity is a reflection of you. We will not tolerate interns who engage in inappropriate behavior on social media, including but not limited to cyber-bullying, threatening or disparaging posts, posting inappropriate photographs depicting or implying gang affiliation or gang colors, violence, alcohol- or drug-use, the use of inappropriate or discriminatory language, or any conduct, behavior or communications that portray you or the office in a negative light. Any such conduct or perceived conduct shall be immediate cause for termination from the internship program. **Applicants to the office are strongly encouraged to review their existing social media pages before applying for an internship, because we will.**

Additionally, the business of the State's Attorneys' Office is serious and sensitive. You are expected to maintain confidentiality of all communications and information learned or overheard in the office. The dissemination of any information, photographs or communications connected to your internship either in the community or upon social media shall be immediate cause for termination from the internship program.

UNDERSTOOD:

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Signature

### **Incomplete applications will not be considered**

#### **COMPLETED APPLICATION CHECKLIST**

- \_\_\_\_\_ Application (complete, accurate, all required signatures)
- \_\_\_\_\_ Resume (attached)
- \_\_\_\_\_ Writing Sample (law students only)
- \_\_\_\_\_ Acknowledgement of Social Media Policy (signed)

Please return your completed application to:  
Office of the Kankakee County State's Attorney  
Attn: Clerkship/Internship Program  
450 E. Court St., 3rd Floor  
Kankakee, Illinois 60901

or via Email: [JRowe@kankakeecountyil.gov](mailto:JRowe@kankakeecountyil.gov)