



Office of Councilmember

Georgette Gómez

Internship Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

(Optional) What languages, other than English do you speak? _____

Briefly explain your career objectives and how this internship will help you achieve your goals.

Are you currently enrolled as a student in an academic program? _____

If so, what school is the academic program located? _____

Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____



Office of Councilmember Georgette Gómez
City of San Diego, Ninth District
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Internship Program Manager
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“To engage, empower, and advocate for our diverse communities.”