

Placement Office
Hart Senate Office Building, Room SH-116
Washington, D.C. 20510 | Phone (202) 224-9167
http://www.senate.gov/employment | TTY (202) 224-4215

Applicants must provide all of the information requested below, submit a resume, and complete the informational interview to register with the Senate Placement Office.

Offices within the United States Senate are equal opportunity employers.

NAME										
		First			Middle			Last		
POSITION(S) DE	SIRED		LEGISLATIVE		ADMIN	ISTRATIVE		PRESS		
TYPE OF EMPLOYMENT			FULL-TIME	☐ PART-TIME			TEMPORARY			
SALARY REQUII	REMENT									
*CITIZENSHIP (\$ *Pursuant to federal			·	om hiring o	applicant	s who are cit	tizens	of certain countri	ies.	
STATES IN WHI	сн үои н	IAVE RE	SIDED AND LEN	IGTH OF T	IME IN I	EACH				
State	Length of F	Residence	State	Length of F	Residence	State		Length of Residence	State	Length of Residence
HAVE YOU EVER HELD A SECURITY CLEARANCE?										
					EXPER	RIENCE				
	1	PLEASE	PROVIDE THE F	OLLOWIN	G BEGIN	INING WITH	н мо	ST RECENT EXPE	RIENCE:	
EMPLOYER					JOB TITI	.E/SALARY_				
REASON FOR L	EAVING _									
EMPLOYER	EMPLOYER JOB TITLE/SALARY									
REASON FOR L	EAVING _									
EMPLOYER					JOB TIT	LE/SALARY				
REASON FOR L	EAVING									

I acknowledge that the Senate Placement Office maintains strict confidentiality with Senate employers regarding vacancies and cannot disclose information pertaining to the vacancies or the referral of applicants and as a condition of registering with the Senate Placement Office, I agree not to seek this information.							
I certify that all of the foregoing information I have supplied in this application is correct and complete. I UNDERSTAND THAT ANY FALSIFICATION OR OMISSION OF ANY INFORMATION CONSTITUTES GROUNDS FOR ANY SENATE EMPLOYER TO NOT EMPLOY ME OR TO DISMISS ME FROM EMPLOYMENT.							
APPLICANT NAME							
SIGNATURE							

PLEASE USE THIS SPACE FOR ANY ADDITIONAL COMMENTS YOU WISH TO MAKE.