



**APPLICATION FORM**  
**Summer Student Internship Program 2012**  
Application due by 11:59 PM EST on Tuesday, January 31, 2012

Your responses on this application form are confidential. Please type your answers (boxes will expand as needed), complete each item fully, and upload as a **.PDF document** on the CLA-ACE website application page. When you submit your form, you should receive an automatic reply confirming receipt. If you do not receive this reply within one business day, please contact Meghan Cowan at mcowan@cla-ace.ca to confirm your form was sent correctly. We thank you for your application, but **only successful applicants** will be contacted. The names of successful applicants will also be posted on our website.

**NOTE: Application Forms exceeding FOUR (4) pages will not be considered. Minimum font size is 10 pt.**

**Personal Information**

Surname	First name
Current address	Phone – including area code
Permanent address	Phone – including area code
Gender	Are you Aboriginal? If yes, please indicate.
E-mail address (N.B. If giving university-based email address, please also provide alternate/permanent email address)	

**Application Details**

How did you learn about this opportunity?	
Please list your availability (dd/mm/yy – dd/mm/yy) (Note that most internships run from May to August)	Have you signed up as a member of CLA-ACE on our website?
Law School:	Year of Study:

**Education**

Degree	Specialization & Awards	Institution	Year rec'd

**Languages (indicate proficiency: basic, intermediate/conversational, advanced/fluent)**

Mother tongue:			
Other language(s)	Speaking	Writing	Reading

## Relevant Employment and/or Extracurricular Background

<b>1 Employer / Organization</b>	<b>Position held</b>	
<b>Address</b>	<b>Start date</b>	<b>End date</b>
<b>Name and title of supervisor</b>	<b>Phone – including area code</b>	
<b>Key responsibilities</b>		
<b>Reason for change</b>		

<b>2 Employer / Organization</b>	<b>Position held</b>	
<b>Address</b>	<b>Start date</b>	<b>End date</b>
<b>Name and title of supervisor</b>	<b>Phone – including area code</b>	
<b>Key responsibilities</b>		
<b>Reason for change</b>		

<b>3 Employer / Organization</b>	<b>Position held</b>	
<b>Address</b>	<b>Start date</b>	<b>End date</b>
<b>Name and title of supervisor</b>	<b>Phone – including area code</b>	
<b>Key responsibilities</b>		
<b>Reason for change</b>		

## Experience and Qualifications

Please explain how you meet the following experience and qualifications. Note that each response should be max. 150 words.

Indicate your interest in the rule of law, good governance, and human rights. Describe where your interest stems from, as well as any experience you may have had in these areas.  
(max 150 words)

Have you ever lived and/or worked in a developing country? If yes, explain your experience.  
(max 150 words)

Describe a situation where, in the face of challenging circumstances, you demonstrated cultural sensitivity, initiative, flexibility, and adaptability.  
(max 150 words)

What will you contribute to the organization that will be hosting your internship?  
(max 150 words)

## Internship Preferences

Internships are available in the following general subject areas. Please list your order of preference.  
(note: 1 = first choice, 3 = last choice)

Human Rights Issues (examples: women's rights, children's rights)

Good Governance/Rule of Law

Aboriginal

ranking

## Terms and Conditions

I understand this position is subject to the following terms and conditions:	<i>please initial in each box</i>
Minimum <u>14 week</u> commitment	
Ability to work autonomously in isolated posts and difficult work environment	
Required to report back to Meghan Cowan twice a month during the internship and complete internship feedback form within one month of completion of internship	
Be available to provide advice to next year's successful interns	
Required upon return, if still attending school or living in same city, to speak at a CLA Chapter Event. If returning to school, required to assist Chapter with future interns and leadership activities.	
_____	_____
Signature	Date

I declare the statements made by me in this form are complete and true to the best of my knowledge.	
_____	_____
Signature	Date