



Diversity Pipeline Internship Program

2018 Application*

Deadline to submit: April 13, 2018

Farella Braun + Martel LLP is an Equal Opportunity employer. It is our policy that all applicants be considered solely on the basis of qualification and ability, and that all employees be treated during employment without regard to any individual's gender, race, color, religion, national origin, ancestry, age, marital status, sexual orientation, pregnancy, physical or mental disability, citizenship, veteran status, or any other class protected by federal, state or local law.

**If you use a resume to supplement this application, please also fill in all requested information even though it may also be contained in your resume.*

| CONTACT INFORMATION | | |
|---|---|-----------------------------|
| Last Name: | First Name: | Middle Initial: |
| Street Address | | |
| City: | State: | Zip: |
| Primary Telephone No.: | Email address: | |
| GENERAL INFORMATION | | |
| Position applied for: Diversity Pipeline Summer Intern | | |
| Are you available between from the start date of the program (Tuesday, June 12, 2018) through its final day (Thursday, July 19, 2018)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Between the above two dates, please specify any dates you are not available: (Example: July 5-15) | | |
| What days/hours are you available to work? Please specify start and end times next to Tuesday, Wednesday & Thursday. (Example: 9 AM – 5 PM) | <input checked="" type="checkbox"/> Monday _____ <input type="checkbox"/> Tuesday _____ <input type="checkbox"/> Wednesday _____ <input type="checkbox"/> Thursday _____ <input checked="" type="checkbox"/> Friday _____ | |
| Have you ever used any other name(s) which is (are) necessary for us to verify your employment or education record? <i>If yes, please specify:</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you over the age of 18? <i>If not, and you do not have a GED/HS diploma, a valid work permit will be required prior to your start date.</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Regular and predictable attendance is an essential function of the job. Is there any reason you would not be able to perform this essential function. <i>If yes, please explain:</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Can you perform the essential functions of the job as listed on the attached job description, with or without accommodation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| What prompted you to apply here? <input type="checkbox"/> Referral (state name): _____ <input type="checkbox"/> Internship Program: _____ <input type="checkbox"/> Parent (state name): _____ <input type="checkbox"/> Other (specify): _____ | | |



EMPLOYMENT RECORD

Please specify any previous employment, including unpaid internships. Begin with your most recent employer and continue in reverse chronological order. If you require additional space, please attach an additional page.

| | | | | | |
|--------------------------------------|---|---------------|---|----|--|
| 1 | Company Name: | | Telephone (include area code): | | |
| | Address: | | Employed (State Month and Year) | | |
| | | | From | To | |
| | Name, Title and Phone Number of Supervisor: | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | Hourly Rate: | | |
| | | \$ Start | \$ Last | | |
| Job Title and Work Responsibilities: | | | Reason for Leaving: | | |

| | | | | | |
|--------------------------------------|---|---------------|---|----|--|
| 2 | Company Name: | | Telephone (include area code): | | |
| | Address: | | Employed (State Month and Year) | | |
| | | | From | To | |
| | Name, Title and Phone Number of Supervisor: | | May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | Hourly Rate: | | |
| | | \$ Start | \$ Last | | |
| Job Title and Work Responsibilities: | | | Reason for Leaving: | | |

EDUCATION*

| School Attended | Name/Location of School | Expected Graduation Date | Course of Study | Certificate or Degree Earned | Overall G.P.A. |
|------------------|-------------------------|--------------------------|-----------------|------------------------------|----------------|
| Last High School | | | | | |
| College/Other | | | | | |

*If applicable, transcripts may be required to verify degree-completion and grades.

List any special honors or achievements:

SUMMARY OF SKILLS

| | | | | | | | | | | | |
|--|--|-----------|--|--|----------|--|-----------|--|----------------------|--|--------|
| <p>General Office Skills Check only those skills in which you are proficient</p> <p><input type="checkbox"/> Typing (_____wpm)</p> <p><input type="checkbox"/> Filing</p> | <p>Software and Technology: Indicate the computer software you have utilized and rate your level of ability by marking the appropriate box.</p> <p>1 = Highly trained; know advanced features; could teach others</p> <p>2 = Can produce work; know most features</p> <p>3 = Limited exposure only</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">1 2 3</td> <td></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>MS Word™</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>MS Excel™</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>MS Outlook/Exchange™</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>Other:</td> </tr> </table> | 1 2 3 | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Word™ | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Excel™ | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Outlook/Exchange™ | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Other: |
| 1 2 3 | | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Word™ | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Excel™ | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | MS Outlook/Exchange™ | | | | | | | | | | |
| <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Other: | | | | | | | | | | |



STATEMENT OF INTEREST

Please attach additional pages, if necessary, to complete this section of your application.

Why would you like to participate in the Diversity Pipeline Internship Program?

What are your academic and professional aspirations?

What do you hope to gain from this experience?



PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

Please review your form to be sure you have provided an answer to every question you intended to answer.

I certify that the answers given by me to the foregoing questions and statements are true and correct, and I authorize investigation of all information requested or contained in this application and/or in my résumé. I understand that providing any false, misleading or incorrect statements may be cause for denial or termination of my employment and that the Firm shall not be liable in any respect if my employment is so denied or terminated because of false, misleading, or incorrect statements, answers or omissions made by me in this application.

I authorize Farella Braun + Martel LLP to contact any and all of the above professional references and any references listed on the additional page.

If I am employed by the Firm, I agree to conform to the rules and regulations of the Firm. I also understand and agree that, except for my employment-at-will status, my wages, hours, working conditions, job assignment(s), and compensation rate(s) are subject to change by the Firm. I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the Firm or at my option. I understand that other than the Executive Committee of the Firm, no manager, supervisor, or other representative of the Firm has authority to enter into any agreement with me for employment for any special period of time, or to make any agreement contrary to the foregoing. Only the Executive Committee of the Firm has the authority to make any agreement with me contrary to the foregoing and then only in writing.

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States, satisfactory references and a clearance as to any conflicts of interest with the clients of Farella Braun + Martel LLP.

Signature: _____

Date: _____