Massachusetts Department of Public Utilities

Application for Internship

A. Applicant Information

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.

Date of Application | Email Address

Name

Present Address

City | State | Zip Code

Permanent Address

City | State | Zip Code

Present Phone # | Permanent Phone # | Cell Phone #

School Currently Attending | Major Area of Study

Years Attended | Current Level | Date Available to Start

Gender Identification: ☐ Male ☐ Female

Race Identification**: Please check one box.

☐ White ☐ Black ☐ Hispanic ☐ Asian/Pacific Islander ☐ Native American

**The completion of this Data Record is optional. Inclusion or exclusion of any affirmative action data will not jeopardize or adversely affect any internship decision.

B. Personal References

Name | Title | Phone # or Email Address

Name | Title | Phone # or Email Address

Name | Title | Phone # or Email Address

C. Additional Information

With this application, please include the following:

☐ One-page typed resume

☐ Cover letter

☐ Responses to the following questions, included as part of your cover letter:

- Why have you chosen to apply for an internship at DPU?

- What qualities, skills, and interests make you the best candidate?

- How will an internship at DPU help you to achieve your career goals?

Send your completed package by mail or email to:

DPU-HR@State.MA.US

Massachusetts Department of Public Utilities
Human Resource Division
One South Station, 5th floor
Boston, MA 02110

THIS IS A CONFIDENTIAL INSERT
APPLICANTS ARE ENCOURAGED BUT ARE NOT REQUIRED TO COMPLETE

It is our policy to guarantee opportunities for all qualified persons without regard to their disability, which can be reasonably accommodated.

Further, the Commonwealth will act in good faith, to affirmatively recruit and consider internship opportunities for individuals in protected categories.

To monitor the success of our recruitment and ADA efforts, we request the following. Please submit your form directly to Theresa Kelly, DPU ADA coordinator.

The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Affirmative Action Data Records are kept in a separate confidential file and are not a part of your Internship Application File. Your cooperation is voluntary. Inclusion or exclusion of any affirmative action data will not jeopardize or adversely affect any internship decision.

Name

Address

City State Zip Code

Check if the following is applicable:

☐ I am a person with a disability*

*A disability means a physical or mental impairment which substantially limits one or more major life activities; a record of such impairment; or being regarded as having such an impairment. ("Major Life Activities" includes but are not limited to functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working. The ADA Coordinator maintains information on disability.