

*Fifth Judicial District*  
*Department of Correctional Services*

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1000 Washington Avenue, Des Moines, Iowa 50314  
515-242-6612 • FAX 515-242-5595

**Intern/Volunteer Application**

**PLEASE PRINT ALL INFORMATION CLEARLY**

Full Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Intern Applicants ONLY**

College Name: \_\_\_\_\_

Advisor Name and Number: \_\_\_\_\_

Major: \_\_\_\_\_

Number of Internship hours needed: \_\_\_\_\_

What area of Corrections are you interested in? \_\_\_\_\_

Employment \_\_\_\_\_

Please share your strengths that may be beneficial in working in the field of corrections:

\_\_\_\_\_

\_\_\_\_\_

Advertising Source- 1. Job Fair  2. Walk-in  3. Word of Mouth  4. Internet  5. Newspaper  6. Word of mouth  7. Other

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date