



U. S. Senator  
**Chuck Grassley**

# Veterans Fellowship Program Application

(Please type or print and provide all information requested)

Please be certain you have a completed application packet including:

- \_\_\_ Completed Application
- \_\_\_ College Transcript (if applicable)
- \_\_\_ Two (2) Reference Letters
- \_\_\_ Description of Program Requirement If Seeking College Credit
- \_\_\_ Résumé
- \_\_\_ Copy of Military ID or DD Form 214

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## General Information:

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

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

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

Phone Number: \_\_\_\_\_

## Military Service:

Dates of Service: \_\_\_\_\_

Branch of Service: \_\_\_\_\_

Awards and Honors: \_\_\_\_\_

## Academic Information:

High School: \_\_\_\_\_

College or University & Graduation Date, if applicable: \_\_\_\_\_

Major(s)/Minor(s): \_\_\_\_\_

Extracurriculars, Community Involvement, and Volunteer Service: \_\_\_\_\_

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## Employment History:

Please describe your recent work experience: \_\_\_\_\_

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## Office Information:

Earliest date you would be available: \_\_\_\_\_

Last date you would be available: \_\_\_\_\_

How many hours per week would you be available? \_\_\_\_\_

Please rank your office preference: Des Moines \_\_\_\_\_ Cedar Rapids \_\_\_\_\_

Will you be seeking college credit for your fellowship? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please attach a brief description of your program's requirements.

## Personal Summary:

(Answer on a separate sheet of paper)

- 1) How have you been influenced by your military service?
- 2) What are your professional goals following this opportunity?
- 3) What current issues are you interested in and why?
- 4) What do you hope to gain from a fellowship in Senator Grassley's office?

Email or fax packet to:

Fellowship Coordinator

[Veterans\\_Fellowship@grassley.senate.gov](mailto:Veterans_Fellowship@grassley.senate.gov)

Fax Number: (202) 224-5136

If you have questions, please contact our office at (202) 224-3744

**Incomplete applications will not be considered.**