

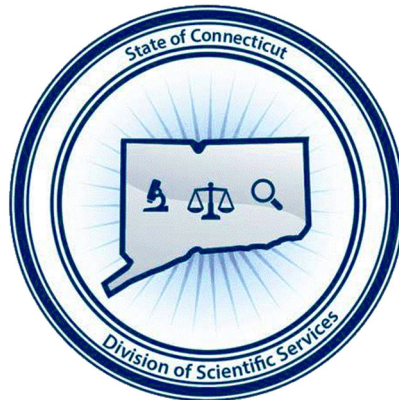
# STATE OF CONNECTICUT

## DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION

### Division of Scientific Services

### Student Internship Packet

## Information and Forms



# **Student Internship Checklist**

*To be completed by Student:*

Please review this packet before completing all parts of the application.

- Read Important Dates and Milestones (page 3)
- Please review and sign Internship Program Acknowledgment Form (page 4)
- Please review and complete the Internship Application (pages 5, 6 & 7)
- Include Cover Letter, Curriculum Vitae (CV) and Transcript

## **Important Dates and Milestones**

All information and forms must be submitted by a specific month and date to be eligible for each internship program.

Below please find the internship cycles and their respective deadlines for applications to be received.

Spring School Semester – February to May

**Application Deadline: November 1st of the previous year**

Summer School Semester – June to August

**Application Deadline: March 15th of the same year**

Fall / Winter School Semester – September to December

**Application Deadline: July 1st of the same year**

### **Available internships are limited:**

- There is no guarantee that all applicants will receive an internship.
- If you do not receive your 1st, 2nd or 3rd option for an internship in your first requested semester, you can request to move your application to the next semester by sending an email to [DSS.Student.Internship@ct.gov](mailto:DSS.Student.Internship@ct.gov)
- After applying if you need to withdraw your application for any reason please notify us immediately by sending an email to [DSS.Student.Internship@ct.gov](mailto:DSS.Student.Internship@ct.gov)

Email the completed checklist, Internship Program Acknowledgment Form, Application, Cover Letter, Curriculum Vitae (CV) and Transcript to:

[DSS.Student.Internship@ct.gov](mailto:DSS.Student.Internship@ct.gov)

**Note: submissions with incomplete documents will not be reviewed.**



# STATE OF CONNECTICUT

## DEPARTMENT OF EMERGENCY SERVICES and PUBLIC PROTECTION DIVISION OF SCIENTIFIC SERVICES



### INTERNSHIP PROGRAM ACKNOWLEDGMENT FORM

The Department of Emergency Services and Public Protection (DESPP), Division of Scientific Services (DSS) is looking for students in the area of Forensics. The internship position is non-paid and is for college students who are required to receive college credit upon completion of the internship assignment. As a requirement of an internship, the student will have to go through a modified background investigation which includes a criminal state and federal check, fingerprinting and a buccal swab will need to be on file in our DNA staff index for possible contamination issues. Selection for internship is contingent upon satisfactory completion of the background investigation.

The purpose of the internship is to provide the intern with hands on working knowledge of the various functions of the Division. The intern may assist in filing and general case management type duties which may include phone calls or emails to various police departments or scanning of discovery/FOIA documents. Some Sections of the Division may be working on special projects such as instrument validation or outsourcing. In these cases, the intern may be asked to assist in portions of these projects.

The intern will also have a rotation through the various Sections of the Division. Depending on their skills and work experience, they may have more hands on roles in various areas.

Please fill out the attached application. Upon receipt of required information, placements will be made according to areas of interest/experience and in order by when the request was received. If selected, the student will be contacted via e-mail to confirm placement and begin the background process.

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

Signature: \_\_\_\_\_

*My signature acknowledges that I am aware of the background investigation and buccal swab.*

**A typed name will substitute for a handwritten signature.**

Date: \_\_\_\_\_



STATE OF CONNECTICUT

DEPARTMENT OF EMERGENCY SERVICES and PUBLIC PROTECTION
DIVISION OF SCIENTIFIC SERVICES



INTERNSHIP APPLICATION FOR COLLEGE STUDENTS

PERSONAL INFORMATION

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

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

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

Contact Phone: \_\_\_\_\_

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

Where do you intend to stay during your internship if accepted? \_\_\_\_\_

SCHOOL INFORMATION

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

Intern Counselor/Advisor: \_\_\_\_\_ Telephone # \_\_\_\_\_

Major: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Is an internship required for your school? [ ] Yes [ ] No

If required, how many hours are needed to fulfill the requirement? \_\_\_\_\_ hours

Overall GPA: \_\_\_\_\_ Please check one: [ ] Undergraduate or [ ] Graduate

The following items must be attached: [ ] Resume [ ] Unofficial transcript [ ] Cover Letter

Questionnaire Information

If you need additional space, please feel free to attach a separate sheet of paper. Make sure that you number the questions you are answering accordingly.

1. What is your knowledge of Forensic Science? (mark all that apply)

- [ ] I have taken a Forensic Science course
[ ] I have read books and articles about Forensic Science
[ ] I enjoy watching non-fictional television shows about Forensic Science
[ ] I enjoy watching fictional television shows about Forensic Science (CSI, etc.)
[ ] Other (explain)



6. There are a limited number of internships available at the Forensic Laboratory. Please tell us why you feel that you should be chosen for one of these internships.

7. Please indicate the term in which you wish to carry out your internship, along with the approximate start and end dates. Reminder: Students needing more than 200 hours to fulfill their program's requirement will only be considered for the summer session.

First Choice

- Spring (February – May)
- Summer (June – August)
- Fall / Winter (September – December)

1<sup>st</sup> Choice: Approximate Start Date: \_\_\_\_\_ Approximate End Date: \_\_\_\_\_

2<sup>nd</sup> Choice: Approximate Start Date: \_\_\_\_\_ Approximate End Date: \_\_\_\_\_

3<sup>rd</sup> Choice: Approximate Start Date: \_\_\_\_\_ Approximate End Date: \_\_\_\_\_

Please check the disciplines you are interested in working in during internship

- Forensic Biology/DNA Section
- Chemical Analysis Section
- Identification Section
- Administrative Support Section (e.g., Evidence Receiving / Case Management)

8. Questions/Comments:

My signature acknowledges that, I am aware my internship hours must be completed within the months allocated for the semester(s) approved.

Date: