

# Application Process

- 1- Student must complete the 2017 Georgia Legislative Internship Application Form
  - a. **Included with the application, the student must also submit:**
    - i. Two to five page essay (Details on application)
    - ii. Transcript (Official hard copy or electronic version accepted)
    - iii. Three to five completed Reference Forms
    - iv. Current resume
- 2- Completed application must be submitted to the Georgia Tech Office of Government and Community Relations by Thursday, October 6, 2016 at noon.

Betsy Jackson, Associate Director  
Government and Community Relations, Georgia Tech  
betsy.jackson@gatech.edu  
A. French Building, Suite 15  
237 Uncle Heinie Way  
Atlanta, GA 30332-0392

- 3- Applicants will be notified, by email, regarding interviews, which will be held Tuesday, October 18, 2016.
- 4- Important dates and deadlines:
  - Application Deadline:** Thursday, October 6, 2016 at 12 noon
  - Candidate Interviews:** Tuesday, October 18, 2016
  - Placement Interviews:** Tuesday, December 13, 2016 & Wednesday, December 14, 2016
  - Orientation:** Wednesday, January 4, 2017 through Friday, January 6, 2017
  - First Day of Session:** Monday, January 9, 2017

## 2017 GEORGIA LEGISLATIVE INTERN PROGRAM

### Application Form

<b>Instructions:</b>	<p>All application materials must be submitted to the Georgia Tech Office of Government and Community Relations by Thursday, October 6, 2016 at noon. <b>Send the original and two copies of:</b></p> <ul style="list-style-type: none"> <li>• Completed application form</li> <li>• Two to five page essay indicating how your studies and experiences have prepared you to participate in the internship program, what you expect to gain from the program, and specific knowledge and skills you will contribute.</li> <li>• Current resume</li> </ul> <p><b>Transcripts and reference forms must be mailed or emailed directly to Betsy Jackson (betsy.jackson@gatech.edu) by the respective schools or references.</b></p>		
<b>Name</b>			<b>School/Student ID #</b>
<b>Current/School Address</b>			
<b>Permanent Address</b>			
<b>Phone</b>	(Cell)		(Home)
<b>Email Address</b> (Most frequently checked)			
<b>Are you a legal resident of Georgia?</b>			
<b>County of legal residence</b>		<b>Date and place of birth</b>	
<b>In which state are you registered to vote?</b>	Georgia	Other	Not registered
<p><b>Instructor supervision</b> is required. Please give the name, department, school, and phone number of the professor who will supervise your internship.</p>			
<p>Diana Hicks School of Public Policy Georgia Tech 404-385-6015</p>			
<p><b>List colleges and professional schools attended</b> (current enrollment first).</p>			
<b>Institution and location</b>	<b>Major</b>		<b>Inclusive Dates</b>
<b>Current Status:</b> (junior, senior)			
<b>Total hours completed:</b>			

<b>Expected date of graduation:</b>			
<b>Major:</b>			
<b>Minor:</b>			
<b>Academic grade point average:</b>		Point system used:	
<b>Undergraduate honors:</b>			
<p>I hereby certify that I am a legal resident of the state of Georgia. If selected, I hereby agree to abide by the rules and policies of the Georgia Legislative Internship Program.</p>			
<p>_____</p> <p>(Signature of applicant)</p>		<p>_____</p> <p>(Date)</p>	

**2017 GEORGIA LEGISLATIVE INTERN PROGRAM  
REFERENCE FORM**

APPLICANT: Fill out this section only. (If not completed, file will be treated as confidential.) Under the provisions of the federal Family Educational Rights and Privacy Act of 1974, you may decide whether letters of reference written at your request are to be held confidential or whether they are to be available for your personal inspection. Check one of the following statements

**\*\*You must have at least three but no more than five references. Include at least two professors (not TAs or grad students).**

Below information is to be filled out by the Applicant ( Student ).

**Confidential File:** I grant permission for this reference form and the accompanying letter or statement to be held confidential,

**Open File:** I retain the choice of having this reference form and accompanying letter or statement available to me.

Below information is to be filled out by the Reference.

Name of Applicant:

How long have you known the applicant?

In what capacity?

Has the applicant taken a course from you?

Please rate the applicant in comparison with others you have known in a similar capacity.

	Below Average	Average	Above Average	Truly Exceptional	Unable to Judge
Research Skills					
Intellectual and analytical skills					
Speaking ability					
Writing ability					
Maturity					
Acceptance of Responsibility					
Determination					
Self-motivation					
Ability to get along with others					

In addition to checking the above factors, it is essential to include a statement indicating the overall strengths and weaknesses of the applicant. (Please attach a letter to this form.)

Signature

Date

Name (please print)

Phone

Title