Application Process

- 1- Student must complete the 2017 Georgia Legislative Internship Application Form
 - a. Included with the application form, the student must also submit:
 - i. Two to five page essay (Details on application)
 - ii. Official Transcript
 - iii. Three to five completed Reference Forms. (Form is available under Important Documents of the Intern Program website).
 - iv. Current resume
- 2- Completed application must be submitted to your College Coordinator (College Coordinators contact information is under Important Documents of the Intern Program website).
- 3- College Coordinator must submit the completed application to the below contact address by Friday, October 21st 2016.

Dr. Dan Franklin, Director GLIP
Dept. of Political Science, Georgia State University
1038 Langdale Hall
38 Peachtree Center Avenue
Atlanta, GA 30303

4- Applicants will be notified, by email, regarding interviews which will be held the first week of November.

2017 GEORGIA LEGISLATIVE INTERN PROGRAM

Application Form

Instructions:

All application materials must be submitted to your college coordinator.

Check with your college coordinator for your school's application deadline.

Send the original and two copies of:

- Completed application form
- 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.
- Current resume

			scripts and reference forms must be mailed directly to the campus coordinator by respective schools or references.								by		
Name									School/Stud	lent ID #			
Current/ Addr	School ess												
Permanent Address													
Phone	(Cell)					(Home)							
Email Address (Most frequently checke													
Are you a legal resident of Georgia?													
County of legal residence		al					Date and place of birth						
In which state are you registered to vote?			Georgia				Other			Not registered			
Instructor internship	superv	rision is	required	. Please	give the I	name, dep	artment, scl	nool, and	d phone numbe	er of the pro	fessor who v	will supervise yo	our
List colleges and professional schools attended (current enrollment first).													
	ution a	and location				Major				Inclusive	e Dates		
				I									
Current Status: (junior, senior)													
Total hour	s comp	leted:											

Expected date of graduation:			
Major:			
Minor:			
Academic grade point average:		Point system used:	
Undergraduate honors:			
I hereby certify that I am a legal resi Legislative Internship Program.	ident of the state of Georgia. If selec	cted, I hereby agree to abide by th	e rules and policies of the Georgia
(Signature of applicant)		(Date)	