## Georgia Legislative Internship Program Application Process for 2025

- 1. Interested students must complete the **2025 Georgia Legislative Internship Application** which includes
  - a. Application Form
  - b. Two to five page essay (Question/details on application form itself)
  - c. University Transcript
  - d. Three to five completed Reference Forms. (Form is available under the Resources tab of the Intern Program website).
  - e. Current resume
- Completed application must be submitted to your College Coordinator (College Coordinators contact information is under Resources tab of the Intern Program website). Check with your College Coordinator for the deadline at your school.
- 3. College Coordinator must submit the completed application to the below contact address by Tuesday, October 15<sup>th</sup>, 2024.

Dr. Stephanie Kerce, GLIP Director Georgia State University Dept of Political Science PO Box 3965 Atlanta, GA 30302

> Phone: (404) 413-6197 Email: glip@gsu.edu

4. Applicants will be notified, by email, regarding interviews which will be held the week of October 21, 2024.

2025 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.				
	<ul> <li>Send these materials to your College Coordinator:</li> <li>Completed Application Form</li> <li>Current Resume</li> <li>Two to Five Page Essay indicating how your studies and experiences have prepared you to participate in the intern program, what you expect to gain from the program, and specific knowledge and skills you will contribute.</li> </ul>				
	Transcripts and reference forms should be mailed directly to the campus coordinator by the respective schools or references.				
Name					
School/Student ID					
Current /School Address					
Permanent Address					
Phone					
Email Address: (Most frequently checked)					
Are you a legal resident of Georgia?		County of Legal Residence			
Date of Birth		City of Birth			
In which state are you registered to vote?	Georgia	Other	Not registered		

Instructor Supervision is required. Please give the name, department, school, and phone number of the professor who will supervise your internship.					
List colleges and professional schools attended (current enrollment first).					
Institution	Location	Major	Dates of Attendance		
Current Status (junior, senior)					
Total Hours Completed:					
Expected Date of Graduation:					
Major:					
Minor:					
Academic Grade Point Avg;		Point System Used:			
Undergraduate Honors:					
I herby 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.					
(Signature of Applicant)		(Date)			