

The Kenneth L. Maddy Institute Legislative Intern Scholar Program 2014-2015 Application

DEADLINES:

- ✓ **Fall 2014** Legislative Intern Scholar Program: Application postmarked, delivered, or faxed by 5 p.m. PDT on Friday, September 5, 2014
- ✓ **Spring 2015** Legislative Intern Scholar Program: Application postmarked, delivered, or faxed by 5 p.m. PDT on Friday, November 7, 2014
- ✓ **Summer 2015** Legislative Intern Scholar Program: Application postmarked, delivered, or faxed by 5 p.m. PDT on <u>Friday</u>, <u>November 7, 2014</u>

Application Requirements:

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	Completed Application: All sections must be completed and signed.
	Resume: Must be current and completed.
	Personal Statement: No longer than ONE page. Write a short biographical sketch. How would the
┚	legislative office benefit from having you in the office? What interest, experience, or background do you have in public policy or government affairs (school, work, volunteerism, etc.)? College Transcripts: Copies are acceptable. Your name must appear on the document. Official transcripts indicating expected graduation date and degree will be required of all applicants selected for the program.
	Eligibility: Must have a 3.0 overall GPA or higher;

Must be at least a Junior in standing (60 units completed) <u>OR</u> Must be a Graduate student in standing.

To Apply:All applications must be received by the specified date. <u>NO EXCEPTIONS</u>. Submit via email, fax, in person, or mail to:

Ana Jovel Melendez
Deputy Director - The Maddy Institute
Thomas Administration Building, Room 126
California State University, Fresno
5214 N. Maple Ave. M/S TA 43 Fresno, CA 93740

Email: ajovelmelendez@csufresno.edu

Office: (559) 278-1133 Fax: (559) 278-1167

Questions regarding the Maddy Institute Legislative Intern Scholar Program may be directed to Ana Jovel Melendez.

All decisions of The Maddy Institute Scholarship Committee are final and confidential. Applications become the property of The Maddy Institute; and, if selected, may be distributed to participating government offices. Applications that are incomplete or submitted after the deadline will **not** be considered.

Last Name:	Firs	First Name:		Middle Initial:	
College:	Major:		Graduation Date:	Student ID Number:	
Mailing Address:		City:	State:	Zip:	
Permanent Address:		City:	State:	Zip:	
Home/Cell Ph.:		Work Ph	 l.:	I	
*Personal E-mail:		*CSU/U(C E-mail:		
1. Last Name:	oyer. Do not reference fa	First Name:		s must be mieu.	
Address:					
Phone Number:		E-mail:			
Relation (faculty, en	nployer, etc.):				
2. Last Name:		First Name:	:		
Address:					
Phone Number:		E-mail:			
Relation (faculty, en	nployer, etc.):				
3. Last Name:		First Name:			
Address:					
Phone Number:		E-mail:			
Relation (faculty, en	nployer, etc.):				

III. Placement Internship Location. Please mark all areas in which you are willing/applying to serve an internship.							
☐ Fall- Local ☐ Spring- Local ☐ Summer- Local ☐ Summer- Sacramento, CA ☐ Summer- Washington D.C.							
If applying for summer, list the							
Areas of Interest. Please mark any	y areas that interest you.						
☐ Agriculture	☐ Globalization	☐ Natural Resources					
☐ Air Quality	☐ Government Reform	Pension					
☐ Armed Forces	☐ Health	☐ Public Advocacy					
□ Banking	☐ Higher Education	☐ Renewable Energy					
☐ Budget	☐ Homeland Security	☐ Science & Technology					
☐ Commerce	☐ Housing	☐ Small Business					
☐ Conservation	☐ Immigration	☐ Social Security					
□ Drugs	☐ Indian Affairs	☐ Telecommunications					
☐ Energy	☐ Judiciary	☐ Terrorism					
☐ Environment	☐ K-12 Education	□ Trade					
☐ Finance	□ Labor	☐ Transportation					
☐ Foreign Affairs	☐ Law Enforcement	□ Veterans					
☐ Global Warming	☐ Medicare/Medicaid	☐ Water					

IV. Signature Required. I certify that all of the statements contained in my application are true, complete, and correct to the best of my knowledge. I am prepared, in good fait, to fulfill all components of The Maddy Institute Intern Scholar Program.

NAME:	DATE:

Help us expand our program:

How d	lid you hear abo	out The Maddy Institute Intern Scholar Program? Check all that apply				
	Professor:	Name:				
	Past Intern: Campus Flyer Website Other (please)	Name: indicate):				
*To be	completed by a	pplicant:				
	Male					
	White Black or Africa Native Hawaiia Asian	an or Other Pacific Islander an or Alaskan American				
	Hispanic Not Hispanic	volunteer information about my ethnicity				

^{*}Completion of this section is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.