

STATE PRESERVATION BOARD INTERNSHIP APPLICATION

All students must submit a resume and current transcript(s) along with this application.

PERSONAL INFORMATION

Name: _____
Last First Middle

Email Address: _____

Current Address: _____
Street City State Zip Code

Permanent Address: _____
Street City State Zip Code

Telephone Number: _____

Driver's License: _____
State Number

Do you have any relatives who work for the State Preservation Board? ____ Yes ____ No

If yes, list name(s) and relationship(s): _____

Have you ever been convicted, as an adult, of a felony or subjected to a deferred adjudication on a felony charge?
____ Yes ____ No

If your answer is "Yes," explain in concise detail on a separate sheet of paper, giving the dates and nature of the offense, the name and location of the court, and the disposition of the case(s). A conviction may not disqualify you, but a false statement will.

EDUCATION

Colleges/Universities, Technical Schools Name and Location	Dates Attended		Hours Completed	Graduated (yes/no)	Degree (i.e. BA)
	From	To			

1. **CURRENT STATUS:** ___ Full-Time Student ___ Part-Time Student

2. **CREDIT INTERNSHIP** ___ Yes ___ No

If Yes:

Name of Advisor: _____

Advisor's Telephone #: _____

Total Number of Hours you must complete FOR CREDIT: _____

Hours per week you must work FOR CREDIT: _____

Placement deadline: _____

3. **PROPOSED WORK SCHEDULE**

Date available to begin work: _____

Semester: Fall Spring Summer

Days and Hours available to work

Monday	Tuesday	Wednesday	Thursday	Friday
hrs: _____	hrs: _____	hrs: _____	hrs: _____	hrs: _____

4. **CLASSIFICATION**

Undergraduate status: freshman sophomore junior senior

Major: _____

Graduate status: 1st Year 2nd Year Other, Explain: _____

Major: _____

Technical School Students:

Coursework
completed: _____

5. **SKILLS AND ABILITIES** (List all special skills you possess, including office equipment and computer skills)

EXPERIENCE, BACKGROUND AND ACTIVITIES

(Attach additional sheets if necessary)

1. List any prior experience you have had that would be applicable to the internship for which you are applying.

2. Describe your motivation for applying for an internship and what you expect to gain from participating in this program.

3. List your community or public service activities (i.e. volunteer or public service organizations, etc.)

4. List honors or awards you have received.

REFERENCES

	Name	Phone	Relationship
1.	<hr/>	<hr/>	<hr/>
2.	<hr/>	<hr/>	<hr/>
3.	<hr/>	<hr/>	<hr/>

IN CASE OF AN EMERGENCY, WHOM SHOULD WE NOTIFY?

Name: _____ Relationship: _____

Day Phone#: _____ Night Phone#: _____

Please list, in order of preference, the name of the Division(s) that you would most like to do your internship. Final placement will depend upon division workloads and staffing needs.

1. _____
2. _____
3. _____
4. _____

AFFIDAVIT

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING THE SPACE PROVIDED.

1. I understand that I am applying for an unpaid internship at-will.
2. I hereby certify that the statements on this application, as well as those on any attachment(s) to this form, are to the best of my knowledge true and correct and that they are all given of my own free will. I agree that any misstatement(s) or omission(s) as to material facts will constitute grounds for unfavorable consideration or dismissal from the agency's internship program.
3. I authorize you to communicate with all of my former employers, schools, officials, and persons named as references. I hereby release all employers, schools and individuals from any liability that may result from responding to any internship, background check and/or reference inquiries that may be performed relative to this application.
4. I understand that the SPB will check with the Texas Department of Public Safety and/or the Federal Bureau of Investigations for any criminal history in accordance with applicable statutes.

Applicant's Signature

Date

Applications should be submitted to the following email or address:

Email: TSPB.Employment@tspb.texas.gov

State Preservation Board
Attn: HR, Internship Program
201 E. 14th St., Ste. 950
P.O. Box 13286
Austin, TX 78711

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Important Note to all Intern Applicants: Upon written request, you have the right to request and obtain copies of all records maintained by the State Preservation Board pertaining to your application and internship assignment. Your records may be requested through the agency's Public Information Officer, P.O. Box 13286, Austin, Texas, 78711. To contest the content of your records, you may submit a written request to the Director of Administration at the same business address.

Equal Opportunity Tracking Information

The following information will be used for gathering statistical data only.

Date: _____ ☐ Male ☐ Female

Name: _____ Date of Birth: _____

Check Appropriate box(s)

☐ White ☐ Hispanic ☐ Asian
☐ Black ☐ American Indian or Alaskan Native ☐ 2 or more races
☐ Native Hawaiian or other Pacific Islander

Recruitment Source

☐ Career Fair ☐ Recruitment Coordinator
☐ Walk-in ☐ College or University Placement Center
☐ State Preservation Board Web Site
☐ Other (please specify): _____