

Texas Holocaust and Genocide Commission
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HOLOCAUST AND GENOCIDE INTERNSHIP APPLICATION
(PLEASE PRINT OR TYPE)

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: _____
(Current) (Mobile Phone) (Work)

Driver's License: _____
(State) (Number)

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 below, 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.

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EDUCATION

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

1. Are you currently a full-time or part-time student?

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 _____

CLASSIFICATION:

Undergraduate status: Freshman Sophomore Junior Senior

Major: _____

Graduate status: 1st Year 2nd Year Other, explain:

Major: _____

Technical School Students:

Coursework completed: _____

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

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EXPERIENCE, BACKGROUND AND ACTIVITIES

1. List any prior experience you have that would be applicable to the internship for which you are applying. *Attach additional sheets if necessary.*

2. Describe your motivation for applying for an internship and what you expect to gain from participating in this program. *Attach additional sheets if necessary.*

3. List your community or public service activities (i.e. volunteer or public service organizations, etc.) *Attach additional sheets if necessary.*

4. List honors or awards you have received. *Attach additional sheets if necessary.*

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EMPLOYMENT HISTORY *Attach additional sheets if necessary*

Employer Name, Address, & Phone No.	Dates Employed		Position Title/Summary of Experience	Supervisor's Name & Phone No.	Reason for Leaving
	From	To			

REFERENCES

NAME	TELEPHONE	E-MAIL	RELATIONSHIP
1. _____			
2. _____			
3. _____			

PROPOSED WORK SCHEDULE:

For the Holocaust and Genocide Internship, the intern should work at least 5 hours per week and up to 20. Hours of less than 5 or more than 20 per week may be acceptable, but must be approved by the THGC Coordinator.

Date available to begin work: _____ Date of internship completion: _____

Days and hours available to work:

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Fri _____

Schedule notes (if necessary): _____

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AFFIDAVIT

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

1. 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 THGC Holocaust and Genocide Internship Program.
2. 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.
3. I understand that THGC may check with the Texas Department of Public Safety for any criminal history in accordance with applicable statutes.

THIS APPLICATION MUST BE SIGNED

Applicant's Signature

Date

Please mail or email applications and other documents to the following:

Texas Holocaust and Genocide Commission
Attn: Internship Program
P.O. Box 12276
Austin, TX 78711

Email: charles.sadnick@thc.state.tx.us

CHECKLIST

Be sure to submit each of the following to the above address and/or email address. All documents must be submitted by the deadline, but they do not have to all be submitted in the same mailing/email.

- Application form
- Resume
- Current transcript(s)

REMARKS (Application procedure, Special Requirements):

The THGC's Internship Application is available on the web at www.thgc.texas.gov. Please mail application, resume, transcript, letter of interest and essay response to the above specified address or deliver them in person at 1302 Colorado St. , Austin, Texas. Cover letters can be attached, but are not required. Resumes cannot be submitted in lieu of applications. Applications will be reviewed, and top applicants will be contacted for interviews. After a qualified person has been chosen for the specified internship, letters will be mailed to all interviewed applicants letting them know that the position has been filled. Disability access for application submission, testing and interview accommodations can be provided upon reasonable notice.

AN EQUAL OPPORTUNITY

AFFIRMATIVE ACTION EMPLOYER