Alabama Secretary of State’s Office

Internship Program Information Packet

2019

600 Dexter Avenue
Post Office Box 5616
Montgomery, Alabama 36103
(334) 242-7200

*Note: Please read this application in its entirety!
Application Deadline: February 1, 2019
Dear Prospective Intern:

Thank you for your interest in serving as an intern with the Alabama Secretary of State’s Office. The provided materials will give you some additional information about our agency and information handled therein.

Please follow the provided instructions to complete the essay and internship application. You will be required to provide a letter of recommendation from your accredited Four-Year University. Please submit completed information as requested.

The interns chosen for this great opportunity will be notified if selected to participate in the Internship Program. Internships are considered throughout the year, so please submit your application at any time for consideration.

I hope this opportunity will be valuable to your transition into the workforce. I know the experience received during this time will prove beneficial to your future endeavors. We look forward to working with you.

Sincerely,

John H. Merrill
Secretary of State
DUTIES OF SECRETARY OF STATE

The Secretary of State is responsible for the following duties:

- Processing and filing documents that are public records that contain the official Great Seal of Alabama
- Serves as the Chief Elections Official for the State of Alabama
- Maintains records of official records
- Primary repository of official records
- Maintains records of land transactions and ownership
- Reserves entity names
- Maintains filing of commercial liens and register new businesses
- Reserves entity names
- Certificates of Existence
- Maintain official copies of state documents
  - Actual official copy of the State Constitution
  - Formal copies of legislative acts enacted into law
  - Executive orders issued by the Governor
  - Regulations and interpretations of statutes issued by state regulatory agencies.
- Maintain records of land transactions and ownership

The duties listed above are only a small indication of the responsibilities maintained by the Secretary of State’s Office.

Divisions

Executive - Many of the executive records have both the signatures of the Secretary of State and of the Governor because the Secretary of State serves as the Governor’s personal notary public. When the Secretary of State is witnessing the Governor’s signature, the Great Seal of Alabama is used as the “notary” seal. Included in this type of executive records are writs of arrest, contracts, deeds, and leases. Other executive records include listings of abandoned vehicles found in the state, information on municipal incorporations, and the names of all notaries public registered in Alabama.

Business Services - Business Entities staff members reserve names of businesses that incorporate to do business in Alabama. The state has about 200,000 corporate filings, and staff members usually get about 300 requests each day for information in those files. The UCC Section maintains more than 220,000 financing statements that are filed by attorneys and banking institutions.

Elections - The Secretary of State is Alabama’s “Chief Election Official.” The Secretary of State is given many different election duties under state law. Election records include vote totals, certified ballots, and records showing how much money candidates and political committees raised and spent during an election. Copies of certificates of election, commissions, and oaths of office are also on file for many elected officials.
This opportunity will allow them to integrate classroom theory into practical principles in a work environment. This process will give them diverse knowledge in areas handled by the Secretary of State.

**Basic Internship Information**

**Objectives for Internship**

- This internship will focus on election practices and business entities
- Meet requirements set by Secretary of State and Chief of Staff
- Assisting other employees with the Secretary of State Office as needed
- 360 hours (9 weeks) or more should be completed by the intern
- An evaluation will be completed at the end of the internship program

**Site and Supervisor Responsibilities**

Providing an experience-The interns will be given instructions on various tasks around the office. These responsibilities will include deadlines with sufficient time of completion. You will be assigned a work area and sufficient material to complete all tasks.

Providing supervision and mentoring-The intern will have a direct supervisor who will provide assignments and guidance during the program. The supervisor is there to answer any questions you may have relating to the assigned tasks.

Goals and Objectives-The goal of this internship is to provide an informative and edifying experience for all participants in the program. The intern will have an opportunity to work with other Secretary of State personnel to prepare for upcoming events.

Evaluation-At the end of the internship, an evaluation will be completed and provided to your school regarding your contributions to the agency.

**Responsibilities**

- Assist with clerical and administrative needs of the office as a whole
- Assist Executive Staff with writing, editing, and preparation of laws
- Assist in answer incoming calls for the Secretary of State’s Office
- Aid in the gathering of information regarding the number of registered voters
- Aid in researching and analyzing the elections laws of the Alabama Code and Federal Election laws as needed
Compensation

The intern will be paid on an hourly basis, approximately $8.27 per hour worked. The office hours for this position have been listed below.

Work Schedule

The workday begins at 8:00 a.m. and ends at 5:00 p.m., Monday through Friday. All employees of the Secretary of State’s Office are expected to be at their work stations at the time designated as their regular work schedule.

Students’ Responsibilities

• Please direct all questions to your supervisor or their appointee upon their absence.
• The intern will complete job assignments in a timely manner
• Notify Supervisor when assistance is needed
• Please make a note of any questions you may have for feedback

Student Information Request

Please provide a letter of recommendation from an accredited four-year college/university to be considered for this internship. The letter must be received before you can be considered. There is an essay requirement, as well. Please see the attached information, and submit all documents to the following address:

Mr. David Brewer, Chief of Staff
ATTN: Brittany Hamilton, Elections Analyst
Secretary of State
Post Office Box 5616
Montgomery, Alabama 36103-5616

Phone: 334-242-7207
Email: David.Brewer@sos.alabama.gov
**Housing Arrangements**

**School Accommodations**

**Auburn University Montgomery**
7440 East Drive
Montgomery, Alabama 36117
Phone: 334-244-3572
Email: housing@aum.edu
Website: [Housing & Residence Life | AUM Campus Life](http://www.aum.edu)

**Faulkner University**
5345 Atlanta Highway
Montgomery, Alabama 36109
Phone: 334-272-7802
Email: housing@faulkner.edu
Website: [Housing - Faulkner University](http://www.faulkner.edu)

**Huntingdon College**
1500 East Fairview Avenue
Montgomery, Alabama 36106
Phone: 334-833-4527
Link: [Housing Application Process - Huntingdon College](http://www.huntingdon.edu)
Website: [Residence Life - Huntingdon College](http://www.huntingdon.edu)
Contact: Christine Simone - 334-833-4349

**Apartments/Extended Stays**

**Capital Towers**
7 Clayton Street
Montgomery Alabama, 36104
Phone: 334-530-5255

**In-Town Suites**
3670 Richard Road
Montgomery, Alabama 36111
Phone: 334-280-2120
Website: [Montgomery Temporary Housing | In-Town Suites Alabama](http://www.montgomerytemporaryhousing.com)

**Summerchase Apartment House**
100 McQueen Smith Road
Prattville, Alabama 36066
Phone: 334-380-5342
Website: [Summerchase Apartment Homes: Apartments for Rent in Prattville, Alabama](http://www.summerchaseapartments.com)
Alabama Secretary of State Internship Guidelines

The Alabama Secretary of State’s Office will hire a select number of college students to serve as interns during the summer and fall. Participating students will have the opportunity to gain work experience in a state government office, as well as develop and enhance their communication, comprehension, business, and writing skills. All applicants must fall under the following criteria:

• 18+ years old by the day of application
• full–time, undergraduate college student in Freshman year or higher

To apply, please fill out the two-page application, and submit an essay that adheres to the following guidelines:

• Topic: What are the three biggest problems facing our state, government, or nation today?
• 350+ words
• MLA format with Times New Roman 12 font
• Five or more paragraphs consisting of an introduction, at least 3 supporting paragraphs, and a conclusion; the intro. paragraph should move from general to specific and contain a thesis statement that lists the forthcoming points of the essay
• In-text citations and Works Cited page required
• The essay must be written by the student applicant. Plagiarism and ghost-written works will not be accepted.

Please submit all materials to Chief of Staff David Brewer via email at David.Brewer@sos.alabama.gov or mail at:

Mr. David Brewer
ATTN: Brittany Hamilton, Elections Analyst
Office of the Secretary of State
P.O. Box 5616
Montgomery, AL 36103-5616

*Note: Upon selection, each student is required to complete the full internship program and all the assigned responsibilities, while maintaining consistent punctuality and professionalism. Inappropriate, unprofessional, and disrespectful behavior will result in termination of the internship.
Alabama Secretary of State Internship Application

*Personal Information*

Please Print.

First Name: ___________________________  MI: _______  Last Name: _____________________________

Preferred Name: ___________________________  Age: ________  (*Must be 18 or older to apply.)

Date of Birth: ____/____/____

Date of Application: ____/____/____

Home Address: ____________________________  City: _________________  State: _______  Zip: _______

Current Address: ____________________________  City: ________________  State: _______  Zip: ________  (*Leave blank if same as home address.)

Home Phone: _____________________________  Cell Phone: ____________________________

Email: ____________________________________________

*Emergency Contacts:

Name: ______________________________________________  Relation: _________________________

Phone Number: _____________________________

Name: ______________________________________________  Relation: _________________________

Phone Number: _____________________________

*Please list any medical concerns:

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________

_________________________________________________________________________________________
Alabama Secretary of State Internship Application

*Academic Information*

Please Print.

Name of College/University: __________________________________________

Major: __________________________ Minor: __________________________

School Year: Freshman _____ Sophomore _____ Junior _____ Senior_____

(*Check one.)

Will you receive college credit for this internship opportunity?: YES_____ NO_____ (*Check one.)

Academic Advisor’s Name: __________________________ Phone #: _______________________

*Previous Job Experience:

_________________________________________________________________________________________

_________________________________________________________________________________________

*What do you hope to gain/learn from this internship? :

_________________________________________________________________________________________

_________________________________________________________________________________________

*Rate the following SOS Divisions in your order of interest:

Executive Division:_____ Elections Division:_____ Business Division:_____ Legal Staff:_____ Information Technology:_____

*When would you like to complete your internship? *If selected, when can you begin, and what would be your last day?

Spring_____ Summer_____ Start Day____________________________

Fall_____ Winter_____ Last Day____________________________

*I hereby verify that all the provided information is accurate, and if chosen, I agree to complete all required responsibilities and tasks as given by the Alabama Secretary of State’s Office, while maintaining the utmost professionalism.

Applicant’s Signature: __________________________________________ Date: _____/_____/_____


**APPLICATION FOR EXAMINATION**

**RETURN TO:** STATE OF ALABAMA
PERSONNEL DEPARTMENT
64 NORTH UNION STREET
P. O. BOX 304100
MONTGOMERY, ALABAMA 36130-4100
WWW.PERSONNEL.ALABAMA.GOV
FAX: (334) 242-1110

**ENTER LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER BELOW**

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**PRINT ALL INFORMATION LEGIBLY**

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<th>Option (if applicable):</th>
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<th>House or Apartment Number</th>
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**Telephone Number:**

- **Home:** (____) Area Code (____)
- **Cell:** (____) Area Code (____)
- **Work:** (____) Area Code (____)

The following information is required for governmental reporting or record keeping purposes:

- **Date of Birth**
  - **(Month)**
  - **(Day)**
  - **(Year)**

- **Sex** (check one)
  1. ( ) Male
  2. ( ) Female

- **Race** (check one)
  1. ( ) White
  2. ( ) Black
  3. ( ) Hispanic
  4. ( ) Asian or Pacific Islander
  5. ( ) American Indian or Alaskan Native
  6. ( ) Other

**EDUCATION:**

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<tr>
<th>High School Diploma or GED?</th>
<th>Yes</th>
<th>No</th>
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**CIRCLE OR BRACKET THE HIGHEST GRADE OF SCHOOL COMPLETED.**

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<th>PROVIDE INFORMATION ON ALL SCHOOLS ATTENDED. SPECIFY UNDERGRADUATE OR GRADUATE WORK. IF ONLINE, INDICATE BY “*” ASTERISK.</th>
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<td><strong>Name and Location of School</strong></td>
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**PROFESSIONAL LICENSE OR CERTIFICATE**

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<th>License/Certificate Issued By</th>
<th>Field/Trade/Specialization</th>
<th>License/Certificate No.</th>
<th>Issue Date</th>
<th>Expiration Date</th>
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**LIST COURSES SUCCESSFULLY COMPLETED (AND HOURS EARNED) WHICH ARE PARTICULARLY RELATED TO POSITION**

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<th>(attach additional sheet, if needed)</th>
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**CERTIFICATION STATEMENT**

I hereby certify, under penalty of perjury, that all statements on or attached to this application are true, correct, and complete. I further agree and understand that any false or deceptive information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of the State of Alabama and may prohibit me from being considered for future employment. I understand that all information on this application is subject to verification, and I consent to criminal history background, military service, and employment checks. I agree to allow my employer/prospective employer to receive a copy of my Alabama Background Check report through ALEA. If employed, I agree to electronic deposits of my payroll check and other state payments; and consistent with applicable laws, to receive compensatory time off in lieu of overtime compensation for any overtime hours worked. The State Personnel Department is not responsible for late receipt of applications due to mail service or faxing malfunctions.

Signature ___________________________ Date ____________

Your name may be removed from an employment register for any disqualifying reason.

AN EQUAL OPPORTUNITY EMPLOYER
List three independent persons, not relatives or present employer, who know you well enough to give information about you.

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<th>NAME</th>
<th>ADDRESS AND PHONE NUMBER</th>
<th>EMPLOYER</th>
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Should you need testing accommodations due to a health problem or disability, you must contact the State Personnel Department.

Have you ever been involuntarily terminated, discharged, forced to resign, resigned with disciplinary action pending, or resigned in lieu of termination from any job?  ( ) Yes  ( ) No

If you answered Yes to the above question, provide an explanation noting any mitigating or extenuating circumstances in the space below. If necessary, you may use a separate sheet or sheets and attach to the application.

Have you ever been convicted of a misdemeanor or felony crime? (including pleading guilty or no contest)  ( ) Yes  ( ) No

If you answered Yes to the above question, list in the space below all prior misdemeanor and felony convictions and any extenuating or mitigating circumstances regarding such convictions. If necessary, you may use a separate sheet or sheets and attach to application.

Have you ever been known by any other name(s)?  ( ) Yes  ( ) No  If Yes, what name(s)? ________________________________________

NOTE: A CRIMINAL CONVICTION WILL NOT NECESSARILY BE A BAR TO CONSIDERATION FOR EMPLOYMENT, EXCEPT THAT A FELONY CONVICTION WILL BAR EMPLOYMENT IN A LAW ENFORCEMENT JOB. THE DISCLOSURE OF A MISDEMEANOR CONVICTION WILL NOT AUTOMATICALLY RESULT IN DISQUALIFICATION. CRIMINAL HISTORIES WILL BE SUBMITTED TO THE NATIONAL CRIME INFORMATION CENTER (NCIC) FOR VERIFICATION. FAILURE TO DISCLOSE A CONVICTION MAY BE CONSIDERED AS GROUNDS FOR DISQUALIFICATION. FOR THESE REASONS, APPLICANTS SHOULD BE CAREFUL TO DISCLOSE ALL CRIMINAL CONVICTIONS.

WORK HISTORY

THIS SECTION MUST BE COMPLETED REGARDLESS OF WHETHER OR NOT A RESUME IS ATTACHED.

Begin with your PRESENT or most recent employment. List in REVERSE ORDER periods of employment. Each time you changed jobs or your title changed should be listed as a separate period. Describe in detail your duties. (Attach additional sheets if needed.)

1. Current or Last Employer

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<th>Address</th>
<th>Your Official Job Title</th>
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<th>FROM Month Year</th>
<th>TO Month Year</th>
<th>Total Months Worked</th>
<th>Number of Hours Per Week</th>
<th>Beginning Salary $ Per</th>
<th>Ending Salary $ Per</th>
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Number/Title of Employees You Supervised

On a Continuing Basis

Name, Title and Telephone Number of Supervisor

Equipment You Operated

Reason for Leaving

Describe Your Duties in Detail

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<td>Employer</td>
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<td>Address</td>
<td>Type of Business</td>
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<th>FROM Month Year</th>
<th>TO Month Year</th>
<th>Total Months Worked</th>
<th>Number of Hours Per Week</th>
<th>Beginning Salary $</th>
<th>Ending Salary $</th>
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Number/Title of Employees You Supervised On a Continuing Basis

Name, Title and Telephone Number of Supervisor

Describe Your Duties in Detail

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<th>Employer</th>
<th>Your Official Job Title</th>
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Number/Title of Employees You Supervised On a Continuing Basis

Name, Title and Telephone Number of Supervisor

Describe Your Duties in Detail

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Number/Title of Employees You Supervised On a Continuing Basis

Name, Title and Telephone Number of Supervisor

Describe Your Duties in Detail

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5. USING THE ABOVE FORMAT, SHOW OTHER EXPERIENCE BY USING ADDITIONAL SHEETS.
COMPLETE THIS SECTION IF YOU ARE CLAIMING VETERAN’S PREFERENCE

If you claim Veteran’s Preference, check the type below. Attach copies (which will not be returned) of the required documents to your application to support your claim.

1. (Veteran (5 points) - Requires DD214 or document showing dates of service and type of discharge. If this has been submitted previously and it is on file with this office, you may disregard this requirement. Note: Must be active duty for a term other than training purposes.
2. (Disabled Veteran (10 points) - Requires DD214 or other document as above and letter of disability from VA. See VA. letter must be updated until register is established or you lose the extra 5 points.
3. (Deceased Veteran’s spouse (10 points) - Requires DD214 or other document as above and marriage and death certificates. Cannot be claimed if spouse remarries.
4. (Disability Veteran’s spouse (10 points) - Requires DD214 or other document as above and VA. letter of disability dated within 6 months. Cannot be claimed unless married to disabled veteran who has been disabled as a result of a VA. disability.
5. (Permanently Disabled Veteran (10 points) - Requires DD214 or other document as above indicating veteran is permanently disabled or DD214 or other document and VA. letter indicating permanent disability.

COMPLETE THIS SECTION IN ORDER TO BE SCHEDULED FOR WRITTEN EXAMS

Written exams will be given in the places below for which a sufficient number of applicants express preference. Indicate by number your 1st, 2nd and 3rd choices.

1. (Birmingham) 6. (Jacksonville) 9. (Montgomery) 11. (Florence) 13. (Huntsville)
2. (Dothan) 8. (Mobile) 10. (Selma) 12. (Tuscaloosa) 14. (Troy)

If you qualify, you will receive a notice showing the place and time you are to report for the exam.

Where did you learn of this job? (check all that apply)

1. (State Career Center) 5. (Friend/Relative) 9. (Legislative Representative) 13. (TV/Radio Commercial)
2. (Job Announcement Notice) 6. (Dept News Bulletin) 10. (State Recruit/ Counselor) 14. (State Personnel Dept. Website)
3. (Newspaper) 7. (Rehabilitation Services) 11. (State Personnel Dept. Information Board) 15. (Other Website)
4. (College Placement/Career Office) 8. (High School Counselor) 12. (Outreach Program (i.e. Church)) 16. (Other)

AVAILABILITY

81 - Northwest Alabama 84 - Jasper/
17 Colbert 18 Winfield Area
30 Franklin 29 Fayette 01 Calhoun
39 Lauderdale 38 Lamar 09 Chambers
40 Lawrence 47 Marion 14 Clay
64 Walker 67 Winston 19 Coosa

87 - East Central Alabama
15 Cleburne 19 Coosa
46 Marion 55 Randolph
64 Walker 67 Winston
87 - East Central Alabama
86 - Birmingham Area
10 Blount 11 Chilton
25 DeKalb 22 Cullman 23 Dallas
28 Etowah 37 Jefferson 35 Perry
58 St. Clair 59 Wilcox
83 - Northeast Alabama
10 Cherokee 05 Blount 11 Chilton
25 DeKalb 22 Cullman 23 Dallas
28 Etowah 37 Jefferson 35 Perry
58 St. Clair 59 Wilcox

Please answer the following questions with care. List in the spaces provided those areas of the state in which you would accept employment. You will be considered for employment only in the locations you indicate. You may choose a combination of up to seven counties and/or regions from the list above.

If you list a region, you will be considered available for all counties in that region. The counties in each region are listed alphabetically below the region.

You will not be considered for jobs involving overnight travel or shift work unless you so indicate.

List the numbers of up to 7 counties and/or regions where you are willing to work

If you want to be considered for appointment by only certain state agencies, indicate here

Enter the earliest date you will be available to interview for employment. (Your name will not appear on a list of eligibles until this date.)

Month Day Year

Will you accept work involving overnight travel? ( ) Yes ( ) No
Will you accept part-time work? ( ) Yes ( ) No
Will you accept temporary work? ( ) Yes ( ) No
Will you accept conditional work? ( ) Yes ( ) No
Which shifts are you willing to work?
0 ( ) all shifts 1. ( ) 1st only 2. ( ) 2nd only 3. ( ) 3rd only 4. ( ) 1st and 2nd only 5. ( ) 1st and 3rd only 6. ( ) 2nd and 3rd only

NOTE: Your name will be placed on inactive status for this class after declining three offers of employment consideration or failing to reply to an agency’s inquiry concerning your availability. Your name may be restored to the active register by written request.
Alabama Secretary of State Internship Application Checklist

*Please submit the following items:*

Recommendation Letter

Essay & Works Cited

Completed Internship Application

Completed Application for Examination

*Please note that all the above materials are required in order to receive acceptance into the program.*