

Tre Hargett, Secretary of State
State of Tennessee



Tennessee State Library and Archives
403 7th Avenue North
Nashville, Tennessee 37243

Charles Sherrill
State Librarian and Archivist

615-741-2764
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APPLICATION FOR INTERNS OR VOLUNTEERS
FOR THE TENNESSEE STATE LIBRARY AND ARCHIVES

Name: Phone:
Current Address:
Permanent Address:

University:
Expected Year of Graduation: GPA:
Major: Minor:

What dates are you expecting to serve as an intern or volunteer (e.g. summer)?

Do you plan to earn school credit for this internship?
Please attach relevant paperwork from your school.

Emergency Contact Information:
Name: Relationship:
Contact Information:

Rank, in order, your preferences for the functional areas that interest you:

- | | |
|---|---|
| <input type="checkbox"/> Public Services | <input type="checkbox"/> Preservation Services |
| <input type="checkbox"/> Library Planning & Development | <input type="checkbox"/> Library for the Blind and Physically Handicapped |
| <input type="checkbox"/> Technical Services – Archives | <input type="checkbox"/> Maintenance & Security |
| <input type="checkbox"/> Technical Services – Library | |
| <input type="checkbox"/> Archives Development | |

Please provide contact information for three professional or personal references:

Name: Title:
Relationship: Contact Information:

Name: Title:
Relationship: Contact Information:

Name: Title:
Relationship: Contact Information:

Describe why you want to intern or volunteer with TSLA and what you hope to accomplish:

List any knowledge or skills that may not be apparent from your resume which would make you a good intern or volunteer candidate:

Candidates may be subject to background checks and will be required to provide additional information such as your Social Security Number.

Submit your application along with your resume to Maggie Bahou sos.hr@tn.gov.

IMPORTANT, PLEASE READ AND SIGN

Please read carefully before signing.

The Tennessee Department of State does not discriminate in employment on the basis of race, sex, religion, national or ethnic origin, age, disability, or military service.

I attest with my signature below that I have given true and complete information on this application. No requested information has been concealed. I authorize the Department to contact references provided. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of this internship/volunteer opportunity or immediate dismissal.

Signature: _____ Date: _____

Return this application and resume/credentials to Human Resources via email at sos.hr@tn.gov or via fax at 615-253-5536.