Fellowship Program Application

Attach resume, cover letter, and transcript.

Colorado Secretary of State Fellowship Program 1700 Broadway, Ste. 550 Denver, CO 80290 Phone: 303-894-2200 Fax: 303-869-4860

Email: administration@coloradosos.gov Form can be emailed, faxed, or mailed.

	For office use only			
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Your information					
Last name	Fi	rst name			
Street address					
City	State		ZIP Code		
Phone number	Alternate phon	Alternate phone number (if any)			
Email address					
Opportunities					
Which Fellowship opportunities would you like to	apply for? Choose two.	1 = first choice, 2 =	second choice.		
Administration Elections					
Public policy - law student	•	Disability access compliance			
Public policy - Master's student		Candidate and initiative filings (ballot access)			
	Campaign fi		roining		
		Election official certification training Election complaints			
Business & Licensing		Legal analyst			
Business analyst		Legislation			
Data analysis & visualization		National Voter Registration Act (NVRA)			
Financial analyst - auditor assistant Voter registration database Legal analyst					
Project management	Information Tech	Information Technology			
		Application development (paid position) Information security			
Schedule					
Which semester are you applying for? Spr	ing Summer	Fall			
Our office is open Monday - Friday, from 8:00 AN What hours are you available to work?	M to 5:00 PM, excluding	holidays.			
Monday Tuesday	Wednesday	Thursday	Friday		
Enter availability for each date. F	or example, "8:00-5:00"; "Al	II day"; "12:00-5:00"	; "N/A"		