GOVERNOR’S OFFICE OF CONSTITUENT AFFAIRS
FELLOWSHIP APPLICATION

Office of Governor Bruce Rauner

PERSONAL INFORMATION

Last Name: _________________________    First Name: _________________________  Middle Initial: _______

Date of Birth: _________________________

Permanent Address: ____________________________________________________________

City: ______________________________  State: _______  Zip Code: _______________

Phone #1 (Main): _________________________  Phone #2 (Optional): _________________________

Email: ____________________________________________________________

ACADEMIC INFORMATION

Undergraduate Institution(s) ____________________________________________________________

Dates Attended: _________________________  GPA: _________________________

Major: ______________________________  Minor: ______________________________

Type of Degree (B.A., B.S., B.B.A, etc.): ______________  Date Received/Expected: ______________

Graduate Institution (if applicable): ____________________________________________________________

Field or Major: ______________________________  Dates Attended: __________________________

Type of Degree: ____________________________________________________________

GPA: _________________________  Date Received/Expected: ______________
COLLEGIATE ACTIVITIES & HONORS

Please list and describe collegiate activities in which you participated and any honors you received, academic or otherwise. Include dates of participation, details on positions held, responsibilities, and any other information related to these experiences. Please begin with your most recent activity.
COMMUNITY INVOLVEMENT

Please list and describe any community service related activities in which you participated. Include the dates of participation, details on positions held, responsibilities and any other information related to these experiences. Please begin with your most recent activity.
WORK EXPERIENCE

Please explain in detail your employment history. Include the name of the organization, title or position, dates employed, description of responsibilities, etc. Begin with the most recent or current employment.

Note: A resume will not be accepted in lieu of the section below.
SUPPLEMENTARY MATERIALS

The following documents are necessary for your application to be considered:

1. Completed application
2. Personal cover letter addressing the following questions:
   a.) Why do you feel you would be a good candidate for the GOCA Fellowship?
   b.) How does the fellowship fit into your professional aspirations and career goals?
   c.) What will you contribute to the Office of the Governor?
3. Policy essay addressing the following:
   Identify and analyze a public policy issue that you feel has a great impact on the future well-being of the State of Illinois. State the issue clearly and provide your opinion on a practical solution. Include facts and supporting arguments. Please be sure to cite your sources as they are used.
4. Most recent résumé
5. Copy of applicant’s official or unofficial academic transcript
6. Minimum of 2 letters of recommendation: one from an academic source and one from a professional source (please limit to a maximum of 3 letters)

Completed application and other supplementary documents should be emailed to: GOV.GOCA@illinois.gov
Please include the completed application, personal cover letter, policy essay, résumé, and academic transcript (official or unofficial) all attached in one email. The email subject line should read “[Last Name], [First Name] GOCA Fellowship Application Documents”. Please also supply this email address to academic and professional references for submission of letters of recommendation, with the applicant’s first and last name appearing in the email subject line.

Questions & Concerns
If you have further questions about the Governor’s Office of Constituent Affairs Fellowship, please contact Denise Albert, Director of Constituent Affairs, at (217) 782-1101 or denise.albert@illinois.gov.