

KENTUCKY TRANSPORTATION CABINET OFFICE FOR CIVIL RIGHTS & SMALL BUSINESS DEVELOPMENT

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MINORITY INTERNSHIP PROGRAM APPLICATION-COLLEGE PROGRAM

INSTRUCTIONS: To be considered for the	, , ,	am, complete and	submit this app	olication with	
other required documents to: Kentucky Transportation Cabinet MIP Coordinator					
Office for Civil Rights & Small Business Development					
200 Mero Street, 6 th Floor West					
Frankfort, KY 40622					
Check each box to confirm that the applic	ation packet is complete.				
Completed application					
Résumé					
Unofficial transcript	ana and ation may at he from		~ · · \		
One letter of recommendation (<i>Recon</i>	imenaation must be from	non-Jamiiy memb	er.)		
SECTION 1: APPLICANT INFORMATIO	N				
FIRST NAME	LAST NAME		SOCIAL SECURITY #		
MAILING ADDRESS (street)	CITY		STATE	ZIP	
PHONE	EMAIL				
PHONE	EWAIL				
SECTION 2: COLLEGE INFORMATION	List all colleges currently (attending.)			
COLLEGE NAME	MAJOR		HOURS CUMULATIVE GP		
			EARNED		
1. Indicate the college program in which	you are currently enrolled	. Undergradu	ate Gradua	ite	
2. Indicate the session in which you wish to enroll. Fall Spring Summer					
SECTION 3: AREAS OF INTEREST (Plac	ement preferences are cor	nsidered, but not g	uaranteed.)		
(Select up to four preferences.)	, ,	, <u> </u>	· ·		
Cabinet Offices & Services:					
Audits Budget & Fiscal Management Civil Rights & Small Business Development					
	Information Technology Human Resource Management				
Public Affairs					
Department of Highways: Construction Constructi	on Procurement	☐ Environment	al Analysis		
	☐ Construction Procurement ☐ Highway Safety		☐ Environmental Analysis☐ Right of Way & Utilities		
Professional Services		Structural Design			
Department of Vehicle Regulation:					
Driver Licensing Motor Cari	riers	Motor Vehicl	e Licensing		



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