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I understand that a background  check shall be conducted before any internship offer is made. All applicants shall sign and return by the assigned date. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | **SIGNATURE** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | **DATE** | | | | | |  | | | | | | | | | | |  | |  | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | |  | | | | | | | | | | |  | |  | | **SECTION 3: EEO & PROGRAM INFORMATION** (*Completion of this section is voluntary. The information is for statistical purposes only.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | How did you learn about the Minority Internship Program?  Transportation Cabinet website | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Career/School Fair  Advisor  Word of mouth  Other (*Specify.*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | **RACE:**  African-American  Hispanic  Asian/Pacific Islander  American Indian/Alaskan Native  White | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |  |  |  | | |  | |  | |  | |  | |  | |  | | | |  | | | |  | | |  | |  | |  | |  | |  | |  | |  | | | **SEX:**  Female  Male | | | | | | | | | | | | | |  | **AGE:** |  | | |  | |  | |  | |  | |  | |  | | | |  | | | |  | | |  | |  | |  | |  | |  | |  | |  | | | Pursuant to Cabinet policy GAP-803, the Kentucky Transportation Cabinet does not tolerate discrimination or harassment of any kind against any protected class. Furthermore, reasonable accommodation will be provided upon request. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | **KYTC Use Only** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Session enrolled:  Fall  Spring  Summer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | **SIGNATURE APPROVAL** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | **DATE** | | | | |  | | | | | | | | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | | | | | | | | | | | | | | | | | |  | | | |  | | |  | |  | | | | | | | | | |  | |  | | |