



## Western Riverside Council of Governments (WRCOG) Public Service Fellowship Program 2021-2022 *Application Packet - Round VI*

### ***Application Check List***

- Application Packet
  - Application Form
  - Family Educational Rights and Privacy Act (FERPA) Consent and Release
  - Statement of Interest
  - Program Agreement Form
- Cover Letter & Resume
- College Transcripts (Undergraduate and Graduate, if applicable)
- One Letter of Recommendation (professional or academic)

### ***Submission Details***

All application documents should be consolidated into one email submission to [fellowship@wrcog.us](mailto:fellowship@wrcog.us).

***Application Deadline: \*EXTENDED Friday, September 24, 2021, by 5:00 p.m., PST***

## Application Form

Name: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Are you currently employed?     Yes         No

If so, how many hours do you work a week? \_\_\_\_\_

Are you currently enrolled in an academic program?     Yes         No

2021-2022 Student Status:     Undergraduate Senior     First-Year Masters     Second-Year Masters

Please specify time of classes:     Daytime         Evening

University: \_\_\_\_\_ Major: \_\_\_\_\_

Area of concentration: \_\_\_\_\_

Undergraduate Cumulative GPA: \_\_\_\_\_ Major GPA: \_\_\_\_\_

Graduate GPA (if applicable): \_\_\_\_\_

Expected Undergraduate Graduation (month / year): \_\_\_\_\_

Expected Graduate Graduation (month / year if applicable): \_\_\_\_\_

If not currently attending school, year graduated: \_\_\_\_\_

Please check all that apply to your connection to the WRCOG subregion:

Current resident         Previous Resident         Place of Work

Place of Education     Other: \_\_\_\_\_

No Connection

***Family Educational Rights and Privacy Act (FERPA) Consent and Release***

I authorize the staff of WRCOG to verify my academic records, for the purpose of being considered for a Fellowship opportunity. Should I be accepted into the program, I understand that the agency in which I serve may have access to records verifying that I am employable under California laws.

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**Applicant Signature**

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**Date**

## ***Statement of Interest***

**In 500 words or less, please describe your interest in the Fellowship Program, what makes you a top candidate for the position, and what do you expect to take away from the Program upon its completion. In addition, please discuss how your prior education and experiences have helped form your guiding principles and future career aspirations. Written responses should be typed and submitted as a Word or PDF file.**

**Alternative Video Submittal: Candidates may submit a video of no longer than 2 minutes, answering the statement of interest prompt above, instead of submitting a written statement. Video files (electronic file or video link) must be submitted along with other application materials by the stated deadline.**

## ***Fellowship Program Agreement Form***

**By signing this document, I agree that I have read each statement carefully and agree to the terms and conditions of the program as listed below.**

- I. I understand that the submission of my application does not guarantee acceptance into the WRCOG Public Service Fellowship Program, nor does it guarantee me receiving a Fellowship position, as this is determined by Host Agency needs and availability.
- II. I understand that my Fellowship matching at an agency may be contingent upon my successful completion of a background check and interview with that agency.

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**Applicant Signature**

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**Date**