# ImageTexas Scorecard Journalism Fellowship

Please send the completed document:

**jobs@TexasScorecard.com**

For which Fellowship term(s) are you applying?

\_\_\_\_ Spring 2023 (legislative session)

\_\_\_\_ Summer 2023

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

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Graduation Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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**Fellowship Details**

Please rank the Fellowship tracts in your order of preference. Leave blanks those for which you are not interested.

\_\_\_\_ Writing

\_\_\_\_ Research

\_\_\_\_ Administration (Fall and Spring only)

How did you hear about the Texas Scorecard Journalism Fellowship?

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Our Values:

Never take political actions personally, never make politics personal.

Always be factual.

Stay mission focused.

Be citizen-driven.

Be happy warriors.

Act systemically and generationally.

Be strategic and disciplined.

Do you agree to abide by these values to the best of your ability, if you are selected?

\_\_\_\_ Yes / \_\_\_\_ No

EDUCATION

Name and City of High School?

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Are you currently attending (or have you ever attended) a college or university?

\_\_\_\_ Yes / \_\_\_\_ No

If yes, what institution and major?

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What, if any, hobbies, extracurricular activities, or pursuits outside of your study, are you involved?

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Please list previous and current employment. \*

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Are you involved with any political organizations?

\_\_\_\_ Yes / \_\_\_\_ No

If so, Please List:

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PHILOSOPHY

Please describe what the term “conservative” means to you.

Please describe what the term liberal” means to you.

Which public policy issue do you prioritize above all others?

If no single issue rises to a clear priority for you, please describe one that is deeply motivating.

Do you have conflicts during the dates of the Fellowship term for which you have applied? \*

\_\_\_\_ Yes / \_\_\_\_ No

If yes, please provide here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_