



# Hays County Development Services

## Records Management Internship

### **Position Description:**

The Hays County Development Services office is seeking interns to assist with records management in the department. Records management job responsibilities include research, digital conversion of records, quality assurance, and project management. The intern will assist with a quality assurance project that involves verifying that the project was completed accurately and then making corrections to any discrepancies. Corrections including using various equipment and software to rescan images to meet requirements. The intern will also create electronic file systems and assist with open records requests. This is a paid internship; pay rate will be discussed at the interview. Internship positions are available April to September 2017.

### **Location:**

Interns will work at the Hays County Government Center and/or Yarrington buildings. Advanced notice will be provided on location.

### **Application Process:**

Submit the attached application to Melody Barron at [melody.barron@co.hays.tx.us](mailto:melody.barron@co.hays.tx.us) The following should be included:

- Cover letter
- Resume
- Availability: Including start and end date, days and hours available, dates unavailable to work and planned late arrivals or requests to leave early.

### **Required Qualifications:**

#### ***Education and/or Experience:***

Major in Business Administration, Public Administration, Political Science, Sociology, Library Science, Records Management or a closely related field.

#### ***Desired Qualifications:***

- Good knowledge of proper grammar, punctuation, and spelling
- Good knowledge of Microsoft Office, specifically Word and Excel
- Basic knowledge of modern business practices
- Excellent customer service skills

This internship is for students willing to work in a fast-paced environment. Interns must be quick learners with the ability to complete tasks from both verbal and written direction. Interns must be able to manage time effectively and work a set schedule. The intern must be able to work during business hours. Interns must be able to work independently and/or with groups and under deadlines.

A criminal background check is required. A person with a final felony conviction is not eligible for an internship. All other matters will be considered on a case by case basis.



## FORMER EMPLOYERS

List all employers for the past 10 years (may continue on attachment). Include your current employer. List at least three employers (may go back past 10 years). List most recent employment first.

Name And Address Of Present Or Last Employer

Dates of Employment : Position:  
From Mo./Yr. To Mo./Yr.

Supervisor Name: Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name: Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason For Leaving:

Name And Address Of Past Employer

Dates of Employment : Position:  
From Mo./Yr. To Mo./Yr.

Supervisor Name: Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name: Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason For Leaving:

Name And Address Of Past Employer

Dates of Employment : Position:  
From Mo./Yr. To Mo./Yr.

Supervisor Name: Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name: Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason For Leaving:

## FORMER EMPLOYERS

Name And Address Of Past Employer

Dates of Employment :

From Mo./Yr.

To Mo./Yr.

Position:

Supervisor Name:

Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name:

Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

Reason For Leaving:

Name And Address Of Past Employer

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From Mo./Yr.

To Mo./Yr.

Position:

Supervisor Name:

Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name:

Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

Reason For Leaving:

Name And Address Of Past Employer

Dates of Employment :

From Mo./Yr.

To Mo./Yr.

Position:

Supervisor Name:

Supervisor Title:

May We Contact Your Employer?  YES  NO

Contact Name:

Contact Phone:

Ending Salary \$ \_\_\_\_\_ PER \_\_\_\_\_

Position Description/Duties: \_\_\_\_\_

Reason For Leaving:

## EMPLOYMENT DESIRED

<b>Date You Can Start:</b> _____	<b>Salary Desired:</b> _____
<b>Job Title of Position(s) Desired:</b> _____	
<b>Type of Position Desired:</b> <input type="checkbox"/> <i>Regular Full-Time</i> <input type="checkbox"/> <i>Temporary Full-Time</i> <input type="checkbox"/> <i>Regular Part-Time</i> <input type="checkbox"/> <i>Temporary Part-Time</i>	
<b>Specify Days Of The Week And Number Of Hours Preferred:</b> _____	
<b>Will You Work Irregular Hours?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	

## EDUCATION AND TRAINING RECORD

Schools Attended	School Name, City, State	DID YOU GRADUATE?	TYPE OF DEGREE	MAJOR
High School Last Attended				
College, University, Technical School				
College, University, Technical School				

List Academic Honors, Scholarships, Etc. That You Feel Are Significant And Relevant To Employment: \_\_\_\_\_

List All Professional Licenses/Certifications:  
 Type: \_\_\_\_\_ State: \_\_\_\_\_ Date Expires: \_\_\_\_\_ Number: \_\_\_\_\_

List All Subjects of Special Study Or Training That You Feel Are Significant and Relevant to Employment: \_\_\_\_\_

## PERSONAL REFERENCES

List three persons other than relatives that have knowledge of your work experience or education.

NAME	ADDRESS	PHONE	YEARS ACQUAINTED

## APPLICANT'S STATEMENT

I certify that all information included in this application packet is true and correct to the best of my knowledge. I authorize Hays County to investigate all information contained in this packet to the extent it deems necessary in arriving to an employment decision. This application will be considered for a period not to exceed 90 days. I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship is of an "AT WILL" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "AT WILL" employment relationship may not be changed by any written document including personnel or employee handbook, or by any verbal agreement. I understand that false or misleading information given in my application package or interview may result in my removal from consideration from employment or if after employment it may result in discipline or discharge. I also understand that I am required to abide by all rules and regulations of the employer in the event of employment. I understand that no person shall be denied employment with Hays County on the basis of any legally prohibited discrimination involving, but not limited to, race, color, creed, religion, gender, national origin, age, disability, marital status, veteran status, sexual orientation or any other legally protected status.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Applicant's Authorization To Release Information

An as applicant for a position with Hays County, I hereby authorize employers and/or educational institutions to release information concerning my work and educational history. The information obtained will only be used in determining my qualifications for the position applied.

You may release or verify the following information:

- \_\_\_\_\_ Any Information requested
- \_\_\_\_\_ Past Employers
- \_\_\_\_\_ Salary History
- \_\_\_\_\_ Dates of Employment
- \_\_\_\_\_ Positions Held
- \_\_\_\_\_ Duties and Responsibilities
- \_\_\_\_\_ Reasons for Leaving
- \_\_\_\_\_ Eligibility for Rehire
- \_\_\_\_\_ Drug and Alcohol Testing Records

Educational Institutions:

- \_\_\_\_\_ Years of Attendance
- \_\_\_\_\_ Degree Obtained
- \_\_\_\_\_ Transcript

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Signature

Date

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Print Name

Social Security Number



## Hays County Equal Opportunity Data Sheet

Date: \_\_\_\_\_

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

Position Number: \_\_\_\_\_

SSN : \_\_\_\_\_

1. Completion of this section is *strictly voluntary*. The information will be used to accommodate Equal Employment Opportunity tracking and reporting requirements.

**Ethnic Origin:**

- Asian
- Black
- Hispanic
- American Indian
- Caucasian
- Other

**Gender:**

- Male
- Female

**Veteran:**

- No
- Vietnam
- Other

2. Completion of this section is *strictly voluntary*. The information will be used to determine if reasonable accommodation circumstances exist.

**Disabled:**

- Yes
- No