**Individual Registration**  
This quick-start guide provides the how-to steps for Internship seekers to register.

**Introduction**  
The Texas Internship Challenge is a campaign challenging Texas employers to offer more internships for Texas students. The website, TXInternshipChallenge.com, is a statewide site where employers can post internships and students can apply for them.

**Registration**  
Internship seekers who want to take advantage of all the system’s tools, must register. After registration, you will be able build or upload a résumé and search and apply for internships.

**Information you will need:**  
- Date of Birth  
- Phone Number  
- Citizenship status  
- Previous employment information

**Select or Key the site URL into your browser:**  
https://www.txinternshipchallenge.com

On the home page, Go to the “Students: Looking for an Internship?” section. Select the “Click here to register and enter your resume.” link.

**Login page**  
The login page displays, click the Individual link in Option 3 – Create a User Account section. The first of several registration pages will display.

This process will take approximately 3-5 minutes.

**The Identification Information page**  
The Identification information page displays, enter all *required information

*Please do not use any personal identification information as your user name (e.g. Social Security Number or FEIN). You will need your User Name and Password for all future activities in this system. Please write this information down and keep it in a secure place. To ensure account security, we strongly urge you NOT to share your User Name or Password with anyone for any reason.*

**Login Information Section**  
- **User Name:** Enter a unique user name (4 - 256 characters, and must include characters, letters or numbers. Allowable characters are # @ $ % ^ . ! * _ + ). Spaces are not allowed.
- **Password:** Enter Password: (8 - 18 characters, and must include at least one uppercase letter, one lowercase letter, one number and one special character. Allowable characters are # @ $ % ^ . ! * _ ).
- **Confirm Password:** Re-enter the same value entered in the password field

**Primary Location Information Section**  
- **Country:** Select country from dropdown
- **Please enter zip code:** Enter a valid zip code

**E-mail address Section**  
Primary E-Mail: Enter email address  
Confirm Primary Email Address: Enter email address

**Demographic Information Section**  
- **Date of Birth:** Select date a birth  
- **Age:** Date of birth will display  
- **Gender:** select gender  
- **Have you registered with the Selected Service?**  
  For more information https://www.sss.gov/

Select the “Next” button at the bottom of the page.
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For Assistance Mon – Fri (8am-5pm CST) either email: WFsupportdesk@twc.state.tx.us or call 512-463-4210

Name Information page

Name Section
*First Name: Enter first name
Middle Initial: Enter middle initial
*Last Name: Enter last name

Select the “Next” button at the bottom of the page.

Residential Address Information page

Residential Address Section
*Address Line 1: Enter address
Address Line 2: Enter additional address information

NOTE: Fields below will be auto populated when the valid Zip code is entered.
*Zip Code: Enter zip code
*City: Enter city
*State: Select state from the list
*County: Select County/parish from the list
*State of Residency: Select County/parish from the list

Select the “Next” button at the bottom of the page.

Phone Information page

Phone Numbers Section
*Primary Phone: Enter phone number
Primary Phone Type: Select phone type from the list
Alternate Phone: Enter “Other” phone number
Alternate Phone Type: Select phone type from the list
Text Message Cell Phone Number:
Enter phone number if you wish to receive texts.
Fax: Enter number

Select the “Next” button at the bottom of the page.

Preference Information page

Preferred Notification Method Section
*Please select a method in which you prefer to receive your notifications:
Select method from list

Site Access
*From where are you accessing this website?
Select method from list

Select the “Next” button at the bottom of the page.

Status Information page

Citizenship Section
*Citizenship: Select answer from list

Disability Section
*Do you have a disability? Select answer

Select the “Next” button at the bottom of the page.

Education Information page

Education Information Section
*Your Highest Education Level Achieved:
Select answer from list
Are you attending school?
Select answer from the list

Select the “Next” button at the bottom of the page.
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My Individual Workspace
Now, you can proceed to the Job search to search for internships, to the Resume Builder to create or upload a resume, or to set up your dashboard in My Individual Workspace.

Employment Information page
Employment Information Section
*Current Employment Status: Select status from list
*Type of business worked in: Select Type from list
*Are you currently looking for work? Select answer
*Within the last 12 months, have you received a notice of termination or layoff from your job or received documentation that you are separating from military service? Select answer

Farm Worker Information Section
*Have you performed work as a farm worker or food processor, including packing houses, nurseries, or orchards, for at least 25 days within the past 12 months? Select Answer

Job Information page
Job Title Section
*What is your desired job title? When value is typed a dropdown list is displayed: Select from the list.

Job Occupation Section
*Suggested Occupation: Select value from list

Ethnic Information page
Ethnic Origin Section
*Are you of Hispanic or Latino heritage: Select Yes/No
*Race - Please check all that apply: Select answer(s) by selecting a box.

Select the “Next” button at the bottom of the page.

Military Information page
Military Service Section
*Are you a caregiver who is a spouse or family member to a member of the armed forces who is wounded, ill or injured and receiving treatment in a military facility or warrior transition unit? Select Yes/No
*Are you a member of the armed forces who is wounded, ill or injured and receiving treatment in a military facility or warrior transition unit? Select Yes/No
*Are you currently in the military, a veteran or the spouse of a veteran? Select Yes/No

Are you the Spouse/Dependent of someone in the active-duty military service, National Guard or Reserves who is currently activated? Select Yes/No

Select the “Next” button at the bottom of the page.

Public Assistance Information page
Public Assistance Section
*Has your household received Temporary Assistance for Needy Families (TANF) payments? Select Yes/No
*Have you been determined eligible for or received Supplemental Nutritional Assistance Programs Assistance (SNAP formerly known as Food Stamps)? Select Yes/No
*Have you received General Assistance Payments? Select Yes/No
*Have you received Refugee Cash Assistance Payments? Select Yes/No
*Have you been supported through the State’s Foster Care System? Select Yes/No

Select the “Finish” button at the bottom of the page.