





First Name:	Last Name:	
Address:		
Phone:	Alternate Phone:	
Best Time(s) to Reach You:		
E-mail:		

#### Instructions:

- Please complete the checklist on Page 2 of this application.
- On a separate sheet, please respond to questions 1-5 (see Page 2 of application). Responses must be typed and double-spaced.
- Fill in the information on this cover sheet and sign and date it.
- Complete the Background Check Policy Sign-off and AmeriCorps Certification (Page 3 of application).
- Return your completed application to the address below, along with:
  - o A resume that includes your education, work, and volunteer history.
  - O Two completed Reference Forms (pages 4-5 and 6-7 of application) in signed, sealed envelopes. References should be familiar with your professional, volunteer, community involvement, or academic experience. References should not be family members, peers, classmates, co-workers, or friends (see Reference Form for further explanation).

I have completed Pages 1-3 of this application honestly and accurately. With this application you will find: my responses to the questions below, a current résumé and two completed Reference Forms.

SIGNATURE	DATE	

Please return completed application materials to:

Kate Allen
Director, YouthServe AmeriCorps Program
DIAL/SELF Youth and Community Services
21 Abbott Street, Greenfield, MA 01301

For more information: phone (413) 774 7054 ext.106 • fax (413) 773-3335 • americorps@dialself.org

Members must be at least 21 years old and U.S. citizens, U.S. nationals or lawful Permanent Residents. YouthServe does not discriminate on the basis of color, race, national origin, sex, political affiliation, sexual orientation, gender expression, religion, or disability. All materials will be furnished in alternate formats upon request; reasonable accommodations can be made for interviews and for service.

YouthServe is funded in part by the Massachusetts Service Alliance, the State Commission on Community Service.



# Member Application 2010-2011 (page 2)



Mi	nimum Qualifications:				
	<ul> <li>Are you at least 21 years old (or will you turn 21 in 2010)?</li> </ul>		yes		10
	<ul> <li>Do you have a high school diploma / GED or equivalent?</li> </ul>		yes		10
	• Are you a U.S. Citizen, U.S. National, or Lawful Permanent Resident?		yes		10
Mo	ost sites ask that members have a valid driver's license and an insured vehicle.	_		_	
	<ul> <li>Do you have a valid driver's license?</li> </ul>		yes	n	10
	Do you have access to reliable transportation?		yes		10
На	ve you read our website?		yes	r	10
On	a separate sheet, please respond to these questions. Responses must be typed.				
1.	Please give a personal motivation statement that describes what you hope to gain as an AmeriCorps Member (answer should be 1-2 pages long, double-spaced).	throu	gh a yea	r of service	9
2.	Please identify three qualities that would make you an effective member of the You examples from your personal or professional experiences that demonstrate these 1-2 pages long, double-spaced).			_	
3.	Please describe any special skills you possess that you would like us to know about organizing, foreign languages, business, public speaking, group facilitation, arts an outreach, writing, editing, media production, teaching).	•	-	•	
4.	All YouthServe sites require some use of computers, including, at minimum, email Please describe your skill level with typing, email, word processing programs, spre computer applications with which you are familiar.		=	_	

5. Is there anything else you would like us to know in considering you as a member?



## Member Application 2010-2011 (page 3)



#### BACKGROUND CHECK POLICY

Satisfactory completion of a background check is a requirement for participation in YouthServe. Background checks are conducted by YouthServe and include state criminal registry information checks in Massachusetts and in the Member's state of residence; Massachusetts Department of Children and Families background check; and national Sex Offender Registry Information (SORI) check. If relevant information appears on the background check report(s), then YouthServe may choose to complete the review process specified by Massachusetts Department of Early Education and Care (EEC) regulations. In accordance with EEC regulations, YouthServe does not release background check information to other agencies. Therefore, Site Partners follow their own policies regarding background checks for Members, and Members may be asked to complete an additional background check at their service sites.

I have read and understood this policy			
	SIGNATURE	DATE	

#### CERTIFICATION

Your application must be certified with your original signature in ink. If you are applying to more than one AmeriCorps program, make a copy for each program that you're applying to first, then sign each one.

I certify that all of the statements made in this application are true, correct, and complete, to the best of my knowledge, and are made in good faith. I understand that misinformation or omission of information could result in disqualification and/or termination as an AmeriCorps member. I also understand that my selection for participation in some AmeriCorps programs, including AmeriCorps\*NCCC, will require a physical examination, including drug and alcohol testing. Background and security checks may also be conducted by some programs.

PRIVACY ACT NOTICE: The Privacy Act of 1974 (5 U.S.C & 552a) requires that the following notice be provided to you: The authority for collecting information from you in this application is contained in 42 U.S.C 12592 and 12615 of the National and Community Service Act of 1990 as amended, and 42 U.S.C 4953 of the Domestic Volunteer Service Act of 1973 as amended. You are advised that submission of the information is entirely voluntary, but the requested information is required in order for you to participate in AmeriCorps programs.

The principal purpose for requesting this personal information is to process your application for acceptance into an AmeriCorps program, and for other general routine purposes associated with your participation in an AmeriCorps program. These routine purposes may include disclosure of the information to federal, state, or local agencies pursuant to lawfully authorized requests, to present and former employers, references provided by you in your application, and educational institutions, for the purpose of verifying the information provided by you in your application. In some programs, the information may also be provided to federal, state, and local law enforcement agencies to determine the existence of any prior criminal convictions. The information will not otherwise be disclosed to entities outside of AmeriCorps and the Corporation for National Service without your prior written permission.

SIGNATURE	DATE





### **Applicant Reference Form**

#### To the Applicant:

Please complete the information below and give this form to each of your references. Select people who know you well and who are familiar with your personal background, education, employment, and/or professional skills. You should not ask a family member, peer, classmate, co-worker, or friend to serve as a reference. Consider asking work supervisors, clergy, teachers, counselors, coaches, or someone else familiar with your motivation and community involvement. Your reference should complete this form, seal it in an envelope, sign his or her name across the seal on the outside of the envelope, and return it to you to include with the application you send to AmeriCorps. Your reference may also mail this recommendation directly to YouthServe.

First Name:\_\_\_\_\_ Last Name:\_\_\_\_

To the Reference:	
The YouthServe AmeriCorps Program serves at-risk youth in rural YouthServe Members strengthen the capacity of local schools an programs and opportunities that allow young people to make po	d nonprofits by developing and implementing
AmeriCorps engages more than 70,000 Americans a year in resultocal and national nonprofits, public agencies, and faith-based and members help communities meet critical challenges in the areas and other human needs. In return, AmeriCorps members may eapay for college or pay back student loans.	d community organizations. AmeriCorps of education, public safety, the environment,
The person named above is applying to be a YouthServe AmeriCo you would be able to evaluate his or her qualifications and provid success of YouthServe largely depends upon an appropriate mater respond to the following questions honestly and completely. Conduring the application review and selection process. Your input is	de us with a candid recommendation. The ch between the program and Members. Please nsiderable value is placed on personal reference.
Reference First Name: Reference	Last Name:
Address:	
Phone: Alternate Ph	none:
E-mail:	





#### Applicant Reference Form (page 2)

On a separate sheet, please respond to these questions.

- 1. How long have you known the applicant, and in what capacity?
- 2. Please comment on the applicant's professionalism (i.e. reliability, ability to work independently, initiative, ability to work with minimal supervision and as part of a team).
- 3. Please comment on the applicant's capacity for youth work and ability to be a good role model for at-risk youth.
- 4. Please comment on the applicant's relationships with others (i.e., peers, colleagues, and supervisors) and ability to work as a member of a team.
- 5. Please comment on the applicant's ability to adapt and work in difficult and changing conditions.
- 6. Do you have any reservations at all about recommending this applicant for a term of AmeriCorps service? If yes, please explain.
- 7. Is there any other information you would like us to consider in evaluating this applicant's ability to serve as a YouthServe AmeriCorps Member?

CONFIDENTIALIT	Y STATEMENT (Please check one.)
	ZE YouthServe to identify me as the source of this reference and to release a copy of this reference n request to the applicant.
	uthorize YouthServe to identify me as the source of this reference, nor do I authorize the release of rence in its entirety to the applicant.
SIGNATURE	DATE

Please return your completed reference form in an envelope signed across the seal, directly to the applicant.

<u>OR</u>

Mail your completed reference form to:

Kate Allen
Director, YouthServe AmeriCorps Program
DIAL/SELF Youth and Community Services
21 Abbott Street, Greenfield, MA 01301

For more information: (413) 774 7054 ext.106 • americorps@dialself.org

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First Name: Last Name:

Address:	
Phone Number:	Email:
To the Reference:	
YouthServe Members strengthen the capaci	s at-risk youth in rural Western Massachusetts. Each year, 18 ity of local schools and nonprofits by developing and implementing people to make positive contributions to their communities.
local and national nonprofits, public agencies members help communities meet critical ch	ericans a year in results-driven service sponsored by thousands of es, and faith-based and community organizations. AmeriCorps allenges in the areas of education, public safety, the environment, orps members may earn an AmeriCorps Education Award that helps
you would be able to evaluate his or her quasuccess of YouthServe largely depends upor	a YouthServe AmeriCorps Member. The applicant has indicated that alifications and provide us with a candid recommendation. The an appropriate match between the program and Members. Please and completely. Considerable value is placed on personal references process. Your input is greatly appreciated.
Reference First Name:	Reference Last Name:
Address:	
Phone:	Alternate Phone:
E-mail:	
(Please go on to page 2 of Reference Form.)	





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