



Arizona Serve
AmeriCorps State Application



NAME: _____
LAST FIRST MIDDLE PREFERRED

PHONE: _____ EMAIL: _____
Preferred Method of Communication: PHONE EMAIL

AmeriCorps Eligibility Requirements:

- **Be a U.S. citizen, U.S. national or lawful permanent resident alien of the U.S.**
- **Be at least 17 years of age.**
- **Have a high school diploma or GED, or agree to obtain one while serving.**

DATE OF BIRTH: _____ Veteran/Active Duty/Military Family Status: _____
MONTH/DAY/YEAR

Earliest date you are available to begin service: _____
MONTH/DAY/YEAR

**Have you previously served in a National Service Program and received an education award?
If yes, which program:**

____ AmeriCorps State and National ____ AmeriCorps VISTA ____ AmeriCorps NCCC

Dates of Service: _____ Did you complete your term of service? If not, why?

Program Name and AmeriCorps Supervisor Full Name, Phone Number, and Email Address:

CURRENT ADDRESS: All information will be sent to this address unless you notify us of a change.

NUMBER AND STREET

CITY STATE ZIP CODE

PERMANENT ADDRESS: (if different than above)-Please give the name and address of a person through whom you can always be reached:

Name: _____ Relationship: _____
FIRST LAST

NUMBER AND STREET

CITY STATE ZIP CODE

CRIMINAL HISTORY

The AmeriCorps application process requires a criminal history check to ensure the protection of community members with whom we work, particularly children, individuals with disabilities, and individuals over 60 years old.

We are investigating for past sexual offenses and violent crimes, or crime that would have a direct bearing on your service.

This background check will entail our search of the National Sex Offenders Registry and an FBI criminal history check, which will require your being fingerprinted at Pre-Service Orientation.

You will not be permitted to serve or work with children, individuals with disabilities, or individuals over 60 years of age without supervision until the history check is complete and you are cleared. The review process is not lengthy, and normally is completed within weeks.

Please list any previous names used: _____

If you already have an "Identity Verified Print" Fingerprint Clearance card, please provide:

IVP Card Number: _____ Original Issue Date: _____

Answer the following questions fully. Existence of a criminal conviction or juvenile adjudication may or may not, depending on the circumstances, disqualify you from consideration. However, any intentional misrepresentation or omission will disqualify you. Do not include minor traffic violations.

Have you ever been convicted as an adult, or adjudicated as a juvenile offender, of any criminal offense by either a civilian or military court, other than minor traffic violations? Yes No

Are you currently facing charges for any offense or on probation or parole? Yes No

If no, skip to "Certification" below.

If you answered yes to any of the questions above, please provide the following information:

Date: _____ Place: _____
MONTH/DAY/YEAR CITY STATE

Charge: _____

Action Taken: _____

Court, Probation, or Parole Officer: _____ Phone: (____) _____

NAME: _____

Address: _____
NUMBER AND STREET

_____ CITY STATE ZIP CODE

You may attach any additional information or explanation on a separate sheet.

Full Name: _____

Date: _____

AmeriCorps State position(s) you are applying for: _____

MOTIVATIONAL STATEMENT

We would like to understand more about you and your reasons for applying to AmeriCorps. Take a few minutes and consider those experiences that have made you the person you are today. Please share with us one of these experiences and how it sparked your interest in community service. If you need additional space, attach a separate piece of paper and limit your total response to 500 words.

EDUCATION

Check the highest level of education that you will have completed by the time you are planning to serve in AmeriCorps. (Check only one.)

- Some high school
 High school diploma or GED
 Technical school/Apprenticeship
- Associate's degree
 Some college
 Bachelor's degree
- Graduate degree
 Other (please specify): _____

List all schools after high school that you have attended, including trade or technical schools, military training and employment training programs.

Name of School (List most recent first)	Location of School (City/State)	Dates Attended		Major or Area of Study	Type of Degree or Certificate	Date Received or Expected
		From Mo./Yr.	To Mo./Yr.			

SKILLS AND EXPERIENCE

Listed below are skill areas that some programs find useful and may seek in AmeriCorps applicants. Indicate the skill areas in which you have had training or experience, including volunteer or community service experience, and indicate how you gained those skills.

EXAMPLE: Public Speaking – Club President

- Architectural Planning _____
- Business/Entrepreneur _____
- Communications _____
- Community Org./Development _____
- Computers/Technology _____
- Conflict Resolution _____
- Counseling _____
- Education _____
- Fine Arts/Crafts _____
- First Aid _____
- Fundraising/Grant Writing _____
- Law _____

- Leadership _____
- Medicine _____
- Outreach _____
- Public Health _____
- Public Speaking _____
- Recruitment _____
- Teaching/Tutoring _____
- Trade/Construction _____
- Writing/Editing _____
- Youth Development _____
- Other (specify): _____

Do you know or have you studied any language(s) other than English? ■ Yes ■ No
 Language(s): _____ Ability (check one): Good Basic Excellent

EMPLOYMENT EXPERIENCE

Beginning with your current or most recent position, list and briefly describe the last four positions you have held or your last ten years of employment you have held. Include self-employment, internships/fellowships, home management, and full- or part-time paid or unpaid work experience. (You may attach a resume instead if it addresses the information requested below.)

NAME AND ADDRESS OF EMPLOYER	DATES	JOB TITLE AND DUTIES
A. Organization, City/State: Supervisor: Phone and email	From: ____/____ MO./YR. To: ____/____ MO./YR. Hrs./week: _____	Title: _____ Duties: Reason for leaving:
B. Organization, City/State: Supervisor: Phone and email	From: ____/____ MO./YR. To: ____/____ MO./YR. Hrs./week: _____	Title: _____ Duties: Reason for leaving:

DATES OF INVOLVEMENT: From: _____ To: _____ Hours per Mo: _____
MONTH/YEAR MONTH/YEAR

Organization Name: _____ Location: _____ Phone: _____

Description of Involvement: _____

REFERENCES (Please provide three professional references)

1. Name: _____ Occupation: _____ Relationship: _____

Years Known: _____ Phone Number: _____ Email: _____

2. Name: _____ Occupation: _____ Relationship: _____

Years Known: _____ Phone Number: _____ Email: _____

3. Name: _____ Occupation: _____ Relationship: _____

Years Known: _____ Phone Number: _____ Email: _____

CERTIFICATION

I understand that before officially being offered an AmeriCorps position, all candidates must submit an application complete with three references. Arizona Serve will explain more about the online application if selected for an interview.

By signing this application, 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. Misinformation or omission of information could result in disqualification or termination as an AmeriCorps member.

SIGNATURE – PRINT NAME HERE

DATE