



Equal Heart AmeriCorps Application

I. Application Cover Sheet

APPLICANT NAME:

AGE:

Equal Heart has opportunities across the country to help reduce community and childhood hunger, lead Adult Education training classes, and coordinate after-school programming.

Requirements: Applicants must meet the following minimum criteria:

- 17 years old or older by program start date
- U.S. Citizen or Permanent Resident *DACA not eligible
- Commitment to serve the community!

In return for service, members receive bi-weekly pay in the form of a living allowance. Upon successfully completing their hours, members receive an education award that can be used at any higher education institution that accepts federal assistance.

Preference given to applicants local to placement sites. No housing or relocation funds provided. Please refer to fact sheet for more information.

Select Service Location:

National Placements (January to August Term)

Must be available 40 hours/week at all locations

- AR Dream Center
- Operation Food Search
- Second Harvest Food Bank of NE Tennessee
- UMC Food Ministry

Do you have other time commitments that restrict the hours you can serve? YES NO

→ If yes, please list your other commitments:

→ Give specific detail on hours you are available to serve:

For questions or to send additional documents:

Email: americorps@equalheart.org

Mail: c/o Equal Heart; 4848 Lemmon Ave. #513 Dallas, TX 75219

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I. Applicant Information

Name: _____
Full Legal Name

SSN: _____
Social Security Number

Address: _____
Address at time of application

_____ *Apartment/Unit #*

_____ *City*

_____ *State*

_____ *Zip Code*

Phone: _____

Email: _____

Date of Birth: _____

Are you a U.S. citizen or a lawful permanent resident? YES NO

Do you speak Spanish? YES NO Other Language: _____

How did you hear about the position? _____

II. Education

Last school attended: _____ **Currently Enrolled:** YES NO

Dates

Location: _____ **Attended:** _____

Did you graduate? YES NO

Any other schooling you want to disclose? _____

Please complete the following high school related information:

I possess a high school diploma or have received an equivalency certificate.

School Name / Year: _____ City/State: _____

I do not possess a high school diploma or equivalency certificate. Therefore,
 I agree to obtain a high school diploma or its equivalent prior to using the education award and certify that I have not dropped out of K-12 school in order to enroll as an AmeriCorps member.

OR

During my term of service, I agree to pursue a high school diploma or equivalency certificate.

III. Work Experience/Extracurricular Activities

Please list your previous work experience beginning with your most recent position. If you have no work experience, please list extracurricular activities, volunteer work, or other leadership roles you have taken on.

Company/Organization: _____ **Title:** _____

Worked/Served From: _____ **To:** _____

Duties : _____

Company/Organization: _____ **Title:** _____

Worked/Served From: _____ **To:** _____

Duties: _____

Have you served as an AmeriCorps Member before? YES NO

Program Name: _____

Program Contact: _____

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IV. Essay

Please complete the following essay question. Please use the form field below or attach as a separate document. Your response should be approximately 250-500 words.

Why are you a good fit for AmeriCorps and what do you hope to gain from participating in this AmeriCorps program?

V. Legal Information

Are you currently on probation or been convicted for any criminal offense other than minor traffic violations?

** Your certifying signature at the end of this application allows us to run a FBI background check on you prior to service.*

YES NO

If Yes, please explain:

VI. Certification

The AmeriCorps application process requires a three-part National Service Criminal History Check. This background check requires a search of the (1) National Sex Offenders Website, (2) a Texas Department of Public Safety check and if applicable, a state repository check through your current state of residence and (3) a FBI fingerprint background check.

By typing my name in the space below and submitting electronically, or by providing an original signature, I consent to the AmeriCorps program to complete the above-mentioned criminal background checks. I am aware that my identity must be verified with a government issued photo ID. I understand that the results of these checks will be kept confidential, but could affect my eligibility to serve in AmeriCorps with Equal Heart. I am aware that I have the right to review the findings. I certify that all the statements made in this application, including verification of high school diploma or equivalency 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. I understand that any offer to serve is contingent upon the results of the required three-part check and proof of my citizenship status and age.

Applicant

Signature: _____

Date: _____

For parent or guardian of applicants under 18 years of age – By typing my name in the space below and submitting electronically, or by providing an original signature, I certify I have reviewed this application, and I authorize my son/daughter/legal ward to apply and, if selected, to participate in AmeriCorps.

Parent or Guardian Signature: _____

Relationship: _____

Printed Name: _____

Date: _____