# UNITED WAY OF ST. JOSEPH COUNTY AMERICORPS MEMBER APPLICATION

Below are the AmeriCorps host sites for the 2018-2019 Program Year. Please mark the site you are applying for with an “X.” If you are applying for multiple sites, please rank them 1-3 with one being your highest preference.

Bright Beginnings

Center for the Homeless

City of South Bend

Dismas of Michiana

Head Start St. Joseph County

REAL Services

River Bend

South Bend Heritage Foundation

St. Margaret's House

Memorial Hospital

South Bend Community School Corporation

United Religious Community

United Way of St. Joseph County

Other:

# INSTRUCTIONS

* Please type responses in the form. Handwritten applications will not be accepted.
* If additional pages are needed, please attach 8.5” x 11” pages only.
* Include your name on the top right corner of any additional pages that you attach.
* **Attach a copy of your government issued picture identification.**
* Please SIGN your application and mail, drop-off, fax, or email (preferred) to:

Aurélie Delavignette

United Way of St. Joseph County

3517 East Jefferson Blvd.

South Bend, IN 46615

Phone: (574) 232-8201 ext. 225

Fax: (574) 239-2251

Email: [adelavignette@uwsjc.org](mailto:adelavignette@uwsjc.org)

# APPLICANT PROFILE

Date:

Last Name: First Name: M.I.: Current Street Address: Suite / Apt: City, State, Zip: Home Phone: Cell Phone: Permanent Address: Permanent Residence City, State, Zip: Social Security Number: Date of Birth:

# GENERAL INFORMATION

## Have you previously been employed by the United Way or have you been a United Way volunteer?

 Yes  No

Location / Department: Position: From (Date): To (Date):

## Have you previously served as an AmeriCorps member?

 Yes  No

In which of the following AmeriCorps programs did you serve (check all that apply)?

VISTA NCCC State Program National Direct Tribes/Territories AmeriCorps Program name and year:

## Are you at least 18 years of age?

 Yes  No

## Do you have a high school diploma or equivalent?

 Yes  No

## If accepted, can you provide proof that you are a citizen or lawful permanent resident of the United States?

Yes No

## Assignments with the AmeriCorps may involve driving. Do you currently hold a valid driver’s license?

 Yes  No

License Number: License State: Expiration Date:

## Have you ever been convicted of any offense other than a minor traffic violation in the past seven (7) years?

Yes No

If yes, give dates and circumstances on a separate sheet of paper.

# EMPLOYMENT RECORD

Please list and describe your previous employment descriptions. Begin with your most recent employment. Do not list AmeriCorps or other national service experience. Be clear, concise, and complete. Include accomplishments and leadership experience. You may also include a resume as supplementary to this application.

1. **Company / Organization:** Address: Dates Employed: Supervisor: Telephone: May we contact this person?  Yes No Duties:
2. **Company / Organization:** Address: Dates Employed: Supervisor: Telephone: May we contact this person?  Yes No Duties:
3. **Company / Organization:** Address: Dates Employed: Supervisor: Telephone: May we contact this person?  Yes No Duties:

# COMMUNITY ACTIVITIES

Please list and describe your volunteer or community service experience including AmeriCorps, religious groups, and other organizations. Do not list experience previously listed in the employment area. Be clear, concise, and complete. If necessary, you may attach additional pages.

1. **Organization:** Address: Dates: Supervisor: Telephone: May we contact this person?  Yes No Duties:
2. **Organization:** Address: Dates: Supervisor: Telephone: May we contact this person?  Yes No Duties:
3. **Organization:** Address: Dates: Supervisor: Telephone: May we contact this person?  Yes No Duties:

# EDUCATIONAL BACKGROUND

Please list all schools attended, training completed, and job-related professional licenses and certifications.

## High School

School Name: City, State: Major / Minor: Degree: Date Completed: **Undergraduate**

School Name: City, State: Major / Minor: Degree: Date Completed: **Graduate**

School Name: City, State: Major / Minor: Degree: Date Completed: **Trade School / Other**

School Name: City, State: Major / Minor: Degree: Date Completed: **Training 1**

Type: Location: Date Completed:

## Training 2

Type: Location: Date Completed:

## Training 3

Type: Location: Date Completed: Please list any professional licenses (other than motor vehicle):

# LANGUAGE SKILLS

Assignments with the St. Joseph County United Way may require providing service to persons with limited English proficiency. Please list languages other than English. Check all appropriate boxes.

|  |  |  |  |
| --- | --- | --- | --- |
| Read | Write | Understand | Comfortable making |
|  |  |  | presentations? |
| Read | Write | Understand | Comfortable making |
| Read | Write | Understand | Comfortable making presentations? |

presentations?

# CERTIFICATION AND AGREEMENT

Please read carefully before signing.

The United Way of St. Joseph County does not discriminate on the basis of sex, race, color, religion, national origin, ancestry, age, marital status, sexual orientation, medical condition, veteran status, nor against any disabled veterans, or qualified individuals with physical or mental disability. I understand that any offer of acceptance is contingent on satisfactory reference, employment, and criminal checks.

I certify that all statements I make on the application are true and complete to the best of my knowledge, and I have withheld nothing that would affect the United Way’s decision to accept me. If accepted, I understand that any false information I have given, whenever discovered, is cause for dismissal. I acknowledge that I have read the above statements and understand them. I authorize the United Way of St. Joseph County to contact former employers, colleagues, and other persons who know me, information that would be helpful in making decisions about my selection, and I release such parties from any liability regarding such disclosure.

Name (Printed): Signature: Date:

# APPLICATION CHECKLIST

Your application packet should include all of the following: One original signed application

One background check release form (attached)

Readable copy of your government issued picture identification

## Please SIGN your application and mail, drop-off, fax, or email (preferred) to:

Amber Werner

United Way of St. Joseph County 3517 East Jefferson Blvd.

South Bend, IN 46615

Phone: (574) 232-8201 ext. 252

Fax: (574) 239-2251

Email: [awerner@uwsjc.org](mailto:awerner@uwsjc.org)

***This program is available to all, without regard to race, color, national origin, disability, age, sex, political affiliation, or, in most instances, religion.***

# INDIANA RESPONSE AND PREPAREDNESS CORPS BACKGROUND CHECK RELEASE FORM

I hereby authorize that I have read the United Way of St. Joseph County’s background check policy (found on page 7 of this document) and I authorize the United Way to conduct a National Criminal History Background Check, in order to gain admittance into the AmeriCorps Program. I understand that I have the right to request that I view the results of this check and will be given the chance to dispute inaccurate information resulting from the check before a selection decision is made. The United Way of St. Joseph County will use the following website to conduct the National Criminal History Background Check:

1. National Sex Offender Public Website (NSOPW)
2. FBI fingerprint-based check
3. Indiana state criminal history check

I authorize the United Way of Saint Joseph County to conduct a National Criminal History Background Check.

I do **NOT** authorize the United Way of St. Joseph County to conduct a National Criminal History Background Check.

I request to view the results of both my National Criminal History Background Check and my National Sex Offender Registry Check.

State of Residence

Name (Printed): Signature: Date:

# UNITED WAY OF ST. JOSEPH COUNTY BACKGROUND CHECK POLICY

The AmeriCorps Program of the United Way of St. Joseph County strives to maintain a safe and productive workplace with honest, trustworthy, qualified, reliable and non-violent program and staff members who do not present a risk of harm to their co-workers or others. For all United Way of St. Joseph County staff and member applicants, the United Way of St. Joseph County will perform, or may request that third parties perform, an Indiana State criminal history background check along with a criminal history background check in the state in which applicants currently reside if not Indiana. The United Way of St. Joseph County will also perform a check with the National Sex Offender Public Registry and an FBI fingerprint-based check for all staff and member applicants. All background checks will be performed in accordance with applicable federal and/or state law.

Background checks may also include volunteer history and education verification, social security number where available, and licensure and motor vehicle record if appropriate to the position. In conducting reference and background checks, the United Way of St. Joseph County may use consumer reporting agencies to gather and report information to the United Way in the form of consumer or investigative consumer reports. All reference and background check results will be maintained in a confidential file, which will be placed in a locked file cabinet accessible only to the Executive Director, Program Director, and the Director of Finance and Administration.

United Way of St. Joseph County program member and staff applicants are expected to cooperate fully with reference and criminal history background checks. Cooperation includes, among other things, providing consent to conduct a reference and background check and responding with truthful and complete information to inquiries made by the United Way of St. Joseph County or third party investigators during the reference and background check process. Failure to cooperate in these respects, or any attempt to interfere with implementation of this policy, or the United Way’ efforts to obtain relevant information, may result in removal of the applicant’s application to the United Way of St. Joseph County program.

A background check will be performed on applicants who have been accepted to the program pending the results of this check. United Way of St. Joseph County applicants and staff applicants will be immediately disqualified if one of the results of their criminal background check reveals any of the following:

1. Any criminal conviction, misdemeanor or felony, related to the health and safety of a child
2. Any criminal conviction considered a violent crime as determined by the United States Department of Justice.

Any other conviction(s) will be discussed with the applicant following their formal interview and conditional acceptance to the program. At this time, the applicant will be given the opportunity to dispute the factual accuracy of the background check if he/she chooses to do so. Following the interview, the Program Director will make a final decision on the applicant’s eligibility to participate. Applicants will not be allowed to begin work or service with the program until all checks mentioned previously have been performed and reviewed by the Program Director.

Any United Way of St. Joseph County AmeriCorps member charged with a crime, misdemeanor or felony, while serving with the program, is required to notify the Program Director no more than 24 hours following the charge. If the charge is related to the health and safety of a child or considered a violent crime as determined by the United States Department of Justice, or involves the possession, sale, or distribution of a controlled substance, the member will be suspended until completion of the trial. If convicted, the member will be dismissed from the program. If acquitted, the member will be allowed to continue their service after meeting with the Program Director.