



2010 Summer of Service Application



I. Application Cover Sheet

APPLICANT NAME:

DATE:

Member Requirements: Applicants must meet all of the following criteria in order to be eligible to apply

- 17 years old or older by June 3, 2010
- U.S. Citizen or Permanent Resident
- Provide a copy of a state ID and birth certificate OR passport
- Attend 3-day Summer Kick-off Training June 3-5, 2010

Application Process:

The Neighbor to Neighbor Texas Corps is now accepting applications for 170 summer positions. All applications received by **April 22nd** will be given priority consideration, although we will accept applications after this date. Applicants are required to attend an Orientation Session to be considered for a position. Applicants go through a two-step interview process – one conducted by Central Dallas Ministries at the Orientation Session and another by the host site. Placements are determined based on eligibility, geographical preference and site availability. Selected members are required to attend a three day kick-off training from June 3-5 and serve through August 14th

Orientation Session: (select one to attend)

Attendance is mandatory in order to be considered for a position. All sessions are held at 409 N. Haskell Ave. Dallas, TX 75246

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Fri, April 23 @ 3pm | <input type="checkbox"/> Sat, April 24 @ 10am | <input type="checkbox"/> Fri, April 30 @ 3pm | <input type="checkbox"/> Sat, May 1 @ 10am |
| <input type="checkbox"/> Fri, May 7 @ 3pm | <input type="checkbox"/> Sat, May 8 @ 10am | <input type="checkbox"/> Fri, May 14 @ 3pm | <input type="checkbox"/> Sat, May 15 @ 3pm |

Member Benefits:

*Members serve, on average, 35 hours per week for a total of 300 hours over the course of the summer. In return members receive a **\$1,800** cash stipend, which is paid out on a biweekly basis, as well as an end of term education award worth **\$1,000**. The bi-weekly cash stipend is \$360 pre-tax. Your total compensation is thus **\$2,800** for 300 hours of service.*

Members are not employees and therefore not paid by the hour. Members who fail to complete their term of service will not receive any portion of their education award.

I would like to be considered for the following Corps: (select one)

- Neighborhood Revitalization Corps:** Members serve with one of three organizations to provide either emergency assistance or build community infrastructure. Applicants must be available 30 hours per week (8am to 5pm) with some Saturday work to be expected. Individual organizations will have additional requirements.
- Education Corps:** Members serve with summer enrichment programs in low-income areas of Dallas. Applicants must be available Mon-Fri, 8am -4pm (some programs vary within this time frame) between June 3, 2010 – August 14, 2010. Applicants must have an interest in working with school-aged youth, no criminal background, and be able to play a leadership role and positive role model for youth.

APPLICATION DEADLINE: APRIL 22nd 2010

Email: jafriawala@centraldallasministries.org
Mail: AmeriCorps; P.O. Box 710385; Dallas, Texas 75371
Fax: 214-828-6392

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II. Biographical Information

| | | | |
|---|--------------------------------|-------------------------------|------------------------------|
| Name: | | SSN: | |
| <i>Last, First</i> | | <i>Social Security Number</i> | |
| Address: | | Apartment/Unit # | |
| <i>Street Address</i> | | | |
| <i>City</i> | | <i>State</i> | <i>ZIP Code</i> |
| Phone: () | E-mail Address: | | Date of Birth: / / |
| Are you a U.S. citizen or a lawful permanent resident? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Have you ever served with another AmeriCorps program? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, when? |
| Do you speak a language other than English? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If yes, what language? |
| Do you have a valid Driver's License? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | If not TX, what state? |
| Availability | MON <input type="checkbox"/> | TUES <input type="checkbox"/> | WED <input type="checkbox"/> |
| | THURS <input type="checkbox"/> | FRI <input type="checkbox"/> | SAT <input type="checkbox"/> |
| Specify the days /hours you are available to serve | | | |

III. Education

List the last two schools you attended:

| | | | | | |
|---------|-----|-------------------|------------------------------|-----------------------------|---------|
| School: | | | City/State: | | |
| From: | To: | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree: |
| School: | | | City/State: | | |
| From: | To: | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree: |

Verification of H.S. Diploma or Equivalency

Please check the box that applies:

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 elementary or secondary 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.

My signature certifies that the above information is true, correct and complete.

Applicant Signature: _____

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IV. Work Experience/Extracurricular Activities

Please list your previous work experience. If you have no work experience, please list extracurricular activities, volunteer work, club membership, youth groups, or other leadership roles you have taken on.

| | | | |
|-----------------------|----------------|---------------------|--|
| Company/Organization: | | Supervisor: | |
| Position : | Phone: () | | |
| Duties: | | | |
| From: | To: | Reason for Leaving: | |
| Company/Organization: | | Supervisor: | |
| Position: | Phone: () | | |
| Duties: | | | |
| From: | To: | Reason for Leaving: | |

V. Legal Information

Existence of criminal convictions/adjudication may or may not, depending upon the circumstances, disqualify you from consideration. However, any intentional misrepresentation or omission will disqualify you. Do not include minor traffic violations.

****Applicants MUST attach an explanation for any YES answers****

| | | | | | |
|--|---------------------------------|--------------------------------|-------------------------------------|---------------------------------|--------------------------------|
| Have you ever been convicted of any criminal offense? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Are you a registered sex offender? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Are you now under charges for any offenses or are pending against you? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Are you now on probation or parole? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

Criminal History Check Authorization

Please check the box that applies:

- I agree to allow the program to conduct a name-based criminal history search in Texas and my current state of residence, if it is not Texas, prior to enrolling me into the program.
- I do not agree to allow the program to conduct a name-based criminal history search in Texas and my current state of residence, if it is not Texas. I understand that I cannot serve in a position with this program that would require a background check to be completed on me.

VI. Certification

| | | | | | | | | | | | |
|---|---|-------------------------|--|-------------------------|--|----------|--|-------------------|--|----------------|--|
| <p>For Applicant:</p> <p>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 also understand that my application for participation in CDM AmeriCorps may require background checks and finger printing.</p> <p>Applicant Signature _____</p> <p>Date: _____</p> | <p>For parent or guardian of applicants under 18 years of age:</p> <p>I have reviewed this application, and I authorize my son/daughter/legal ward to apply to CDM AmeriCorps.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Parent / Guardian Name:</td> <td></td> </tr> <tr> <td>Relationship to Member:</td> <td></td> </tr> <tr> <td>Address:</td> <td></td> </tr> <tr> <td>City, State, Zip:</td> <td></td> </tr> <tr> <td>Contact Phone:</td> <td></td> </tr> </table> <p>Parent Signature: _____</p> <p>Date: _____</p> | Parent / Guardian Name: | | Relationship to Member: | | Address: | | City, State, Zip: | | Contact Phone: | |
| Parent / Guardian Name: | | | | | | | | | | | |
| Relationship to Member: | | | | | | | | | | | |
| Address: | | | | | | | | | | | |
| City, State, Zip: | | | | | | | | | | | |
| Contact Phone: | | | | | | | | | | | |

CDM AmeriCorps is available to all, without regard to religion, race, color, national origin, gender, political affiliation, disability, sexual orientation, creed, or veteran status.

VII. Essay

Please complete the following essay question. Your response should be approximately 250-500 words. Pay particular attention to content as well as mechanics (grammar, spelling, punctuation, etc.), as essays are evaluated based on both of these criterion. Please attach the essay to your completed application.

What skills, abilities, professional and/or community experience will make you a successful participant in the Neighbor to Neighbor Texas Corps?