**Summer of Service 2022**

**Application Form**

For questions, please call 828-697-5777 or email **summerofservice@conservingcarolina.org**

# APPLICANT INFORMATION

**Your Legal Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Nickname:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Age:** \_\_\_\_\_\_\_

**High School:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade Level:** \_\_\_\_\_

**Graduation Date (Anticipated or Actual):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Preferred Language:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Current Address***

**Street:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip Code:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Contact Information***

**Email Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Mobile Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The best way and time of day to reach me is:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How did you hear about Summer of Service?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Previous AmeriCorps Service***

**Have you previously served in AmeriCorps?** **Yes** ☐ **No** ☐

**If “yes,” describe your previous AmeriCorps Service:**

**Program Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Location:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**From (mo/yr):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **To (mo/yr):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Did you complete your term of service? Yes** ☐ **No** ☐

# OPTIONAL INFORMATION

*The information in the section below is optional (for demographic data only) and will not be used in making selection decisions. Describe yourself, check all that apply:*

|  |  |  |
| --- | --- | --- |
| ☐African American | ☐Alaskan Native | ☐Asian American ☐Hispanic/Latino |
| ☐Middle Eastern | ☐Indian Subcontinent | ☐Native American Indian |
| ☐Pacific Islander | ☐White/Caucasian | ☐Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# CERTIFICATION

|  |  |  |
| --- | --- | --- |
| Are you a U.S. citizen, national, or lawful permanent resident of the U.S? | **Yes** ☐ | **No** ☐ |
| Are you willing to submit to a Criminal History Check? | **Yes** ☐ | **No** ☐ |
| Have you ever been convicted of a felony? | **Yes** ☐ | **No** ☐ |

If “YES,” please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If selected into the program, I understand that I will be required to provide eligibility documentation, including birth certificate or passport copy, valid photo ID, and Social Security card copy before the start of service.

**Yes** ☐ **No** ☐

**Are you available for the duration of time from June 20 to July 29? Yes** ☐ **No** ☐

**Do you have any date conflicts during this time? Please describe:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*The policy and intent of Conserving Carolina and Summer of Service is to provide equal employment opportunity to all persons regardless of race, color, religion, national origin, marital status, political affiliation, sexual orientation or gender identity, disability, sex or age, or other status protected by law. Individuals with disabilities are encouraged to apply. AmeriCorps Project Conserve will provide reasonable accommodations to individuals with known mental / physical disabilities.*

**This position requires participants to perform work that is physically strenuous and repetitive in sometimes adverse weather conditions, such as rain or heat, for up to 8 hours per day. Are you able to meet these demands, with or without accommodations?** **Yes** ☐ **No** ☐

# SHORT ANSWERS

*Please answer each of the following questions in the space provided*

1. **Why do you want to serve in the AmeriCorps Summer of Service team?**
2. **Please describe how this AmeriCorps position will benefit you personally and professionally.**

I am interested in working to contribute to my community and to enhance and maintain the natural and cultural resources of western North Carolina. I certify that all information I have given above is true and correct to the best of my knowledge. I understand that incorrect statements constitute grounds for immediate dismissal.

**Applicant Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# PARENT/LEGAL GUARDIAN PERMISSION

I, the parent/legal guardian of the under-18 applicant, have discussed this program with the applicant and I authorize him/her to apply.

**Parent/Guardian Printed Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email Address**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone Number:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# SUBMISSION INSTRUCTIONS

This application must be filled out completely to determine applicant's eligibility and availability. Incomplete applications may have to be rejected. Participants must be at least 17 years of age on the first day of service (June 20, 2022).

1. Drop off your application at Conserving Carolina at 847 Case Street Hendersonville, NC 28792 or email a complete, signed application form to summerofservice@conservingcarolina.org. If you do not have access to a printer or email, please call 828-697-5777 to arrange for a paper application.
2. Choose **two** individuals who know you well and can recommend you for participation in the Summer of Service program (ex. guidance counselor, teacher). Send each person the Recommendation Form and ask them to email the completed form to summerofservice@conservingcarolina.org.