



Literacy Support Corps
Member Application
2009-2010



Mail application to: **WORD-Family Resource Centers • Attention Brook Clark •**
• 2525 Palmer • Suite 1 • Missoula, MT 59808

Name: _____ Date of Birth: _____

Current Address: _____ Permanent Address: _____

Current Phone: _____ Permanent Phone: _____
 Cell: _____

Home: _____

Work: _____ Shirt Size: S M L XL XXL XXXL

Email Address: _____ Sex: F M

Have you ever served in an AmeriCorps program before? Yes No

If yes, did you successfully complete your term of service?

Yes No

If yes, list all states and dates:

Term 1 _____

Term 2 _____

How did you hear about the Literacy Support Corps?

- Newspaper
- Past/current member
- AmeriCorps website
- WORD-Family Resource Center website
- Other website _____
- School/University _____
- Other _____

Location:

Missoula Other _____

Self-Disclosure:

Have you ever been convicted of a felony or sexual misconduct or do you have charges pending?

Yes No

Criminal background and sex offender checks will be completed on all applicants prior to service. Selection into the program is contingent upon review of the applicant's criminal history, if any. This information may be shared with host site supervisors for further review.

Preference: Use numbers 1 and 2 to rank your preference. Number 1 indicates your first choice.

_____ Full-Time _____ Part-Time

Educational Background: (Check highest level achieved)

- | | |
|---|--|
| <input type="checkbox"/> Less than high school | <input type="checkbox"/> Technical College degree or certificate |
| <input type="checkbox"/> GED | <input type="checkbox"/> College Graduate |
| <input type="checkbox"/> High School Graduate | <input type="checkbox"/> Graduate/Professional Degree |
| <input type="checkbox"/> 1-3 years post High School education | <input type="checkbox"/> Other _____ |

Beginning with the most recent, list past schools attended:

Name: _____ Dates Attended: _____

Location: _____ Area of Study: _____

Type of Degree: _____ Date Received: _____

Name: _____ Dates Attended: _____

Location: _____ Area of Study: _____

Type of Degree: _____ Date Received: _____

Name: _____ Dates Attended: _____

Location: _____ Area of Study: _____

Type of Degree: _____ Date Received: _____

Employment Record: Beginning with the most recent (Include any self-employment, home management, military service, wage or salaried employment. Past employers will be contacted unless otherwise noted)

Employer: _____ Dates Employed: _____

Address: _____ Phone: _____

Supervisor: _____

Position title, duties, and responsibilities: _____

Reason for leaving: _____

Employer: _____

Dates Employed: _____

Address: _____

Phone: _____

Supervisor: _____

Position title, duties, and responsibilities: _____

Reason for leaving: _____

Employer: _____

Dates Employed: _____

Address: _____

Phone: _____

Supervisor: _____

Position title, duties, and responsibilities: _____

Reason for leaving: _____

References:

You will need to supply 3 references with your application.

Directions for submitting references:

Download our official Recommendation Form.

Use this Recommendation Form with each reference.

Be sure to indicate, on each form, whether or not you choose to waive your right to review a recommendation.

Indicate this preference in the box on page one **BEFORE** giving the form to your recommender.

Read through the entire Recommendation Form **BEFORE** giving the form to your recommender.

Make sure you submit all three recommendations with your application. An application is incomplete until all pieces have been received by WORD, or, an alternative has been agreed upon by WORD Program staff.

We encourage you to request recommendations from people who know you well, such as teachers, employers, guidance counselors, or community members. Please do not include recommendations from family members or personal friends.

Thank you

Personal Statement: *All applicants are required to complete questions 1 through 7. Use separate paper for your answers and attach to your application.*

1. Why do you want to serve in the Literacy Support Corps and what do you expect to gain from the experience?
2. What relevant character traits, skills, and experiences will you bring to the Literacy Support Corps?
3. Please describe your experience leading or working in a group or team and what you gained from that experience.
4. Please describe any recent volunteer experiences and why you chose to serve in that capacity.
5. Please describe experiences you have had working with schools and/or families.
6. Please describe experiences you have had coordinating activities and/or events.
7. Please describe skills and/or experience you have in recordkeeping, data collection, writing/editing, and general office work (Include any office, computer or technical equipment, and software programs you are skilled in using).



Certification:

I certify that all the statements made in this application are true, correct, and complete to the best of my knowledge, and are made in good faith. I understand that misinformation or omission of information could result in disqualification and/or termination as an AmeriCorps and Literacy Support Corps member. I understand that criminal and sexual offender background checks will be done on all Literacy Support Corps applicants prior to service. Selection into the program is contingent upon review of the applicant's criminal history, if any. Information resulting from these checks may be shared with prospective Site Supervisors in order to attain confident placement at a site. I understand that my selection for participation in the Literacy Support Corps will require documentation of a current TB test, Social Security Card, and proof of US citizenship with either a birth certificate or current passport.

Signature: _____ Date: _____