



The DREAM Program, Inc.

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AMERICORPS MEMBER APPLICATION

To finish the application process (and start your work with DREAM!!!):
complete this application form and bring it with you to your first day with
DREAM.

Full Name: _____ **SSN#:** _____

Address (Current): _____

Address (Permanent): _____

Current Day Phone: _____ **Permanent Phone:** _____

Current Evening Phone: _____ **E-mail:** _____

Best Time to Call: _____ **Date of Birth:** _____

Please indicate size for T-shirt: S, M, L, XL, 2XL, 3XL, 4XL, 5XL, 6XL

On a separate sheet of paper, please answer the following:

1. Personal motivation statement – What do you hope to gain from your time with DREAM? What do you hope to gain as an AmeriCorps member?
2. If you were shipwrecked and ended up alone on a deserted island, what three CDs would you want to have with you (assuming you had something to play them on)?

LEGAL

Answer the following questions fully. Existence of criminal conviction/adjudication may or may not, depending on the circumstances, disqualify you from consideration. However, any intentional misrepresentation or omission will disqualify you. Do not include minor traffic violations.

Have you ever been convicted, or adjudicated as a juvenile offender, of any criminal offense by either a civilian or military court, other than minor traffic violations? Yes No

Are you now: under charges for any offenses? Yes No on probation or parole? Yes No
If no, skip to "Certification" below. If you answered yes to any of the questions above, please provide the following information:

Date: _____ Place: _____
MONTH/DAY/YEAR CITY, STATE

Charge: _____ Action Taken: _____

Court, Probation, or Parole Officer: _____ Phone: () _____

NAME, CITY, STATE

Address: _____
STREET ADDRESS, CITY, STATE, ZIP CODE

You may attach any additional information or explanation on a separate sheet.

CERTIFICATION (Your application must be certified with your original signature in ink.)

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 understand that misinformation or omission of information could result in disqualification and/or termination as an AmeriCorps member. I also understand that my selection for participation in some AmeriCorps programs, including AmeriCorps*NCCC, will require a physical examination, including drug and alcohol testing. Criminal background checks are a requirement for participation in the DREAM Program.

PRIVACY ACT NOTICE: The Privacy Act of 1974 (5 U.S.C § 552a) requires that the following notice be provided to you: The authority for collecting information from you in this application is contained in 42 U.S.C 12592 and 12615 of the National and Community Service Act of 1990 as amended, and 42 U.S.C 4953 of the Domestic Volunteer Service Act of 1973 as amended. You are advised that submission of the information is entirely voluntary, but the requested information is required in order for you to participate in AmeriCorps programs.

The principal purpose for requesting this personal information is to process your application for acceptance into an AmeriCorps program, and for other general routine purposes associated with your participation in an AmeriCorps program. These routine purposes may include disclosure of the information to federal, state, or local agencies pursuant to lawfully authorized requests, to present and former employers, references provided by you in your application, and educational institutions, for the purpose of verifying the information provided by you in your application. In some programs, the information may also be provided to federal, state, and local law enforcement agencies to determine the existence of any prior criminal convictions. The information will not otherwise be disclosed to entities outside of DREAM and AmeriCorps and the Corporation for National and Community Service without your prior written permission.

SIGNATURE

DATE

I have completed both sides of this application honestly and accurately. With this application you will find: my responses to the above questions.

Applicant's Signature

Date