



SITTING BULL COLLEGE/AMERICORPS GED ACADEMIC COACH APPLICATION

PERSONAL PROFILE

NAME: _____
LAST
FIRST
MIDDLE

AmeriCorps members must be a United States citizen, U.S. national or lawful permanent resident. Are you a United States citizen, national, or lawful permanent resident alien? Yes No

If you are a lawful permanent resident alien and you received your card after January 1987, what is your registration number and card expiration date? _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____
MO/DD/YEAR

PLACE OF BIRTH: _____
CITY/STATE/COUNTRY

GENDER: MALE FEMALE

Earliest date you are available to begin service: _____

CURRENT ADDRESS: All information will be sent to this address unless you notify us of a change.

NUMBER AND STREET (IF POSSIBLE, INCLUDE A NUMBER AND STREET ADDRESS WHEN USING A P.O. BOX)

CITY
STATE
ZIP CODE

Home Phone: (____) _____ **Cell Phone:** (____) _____

Email: _____

EMERGENCY CONTACT/PERMANENT ADDRESS (if different than above): Please give the name and address of a person through whom you can always be reached.

Name: _____ Home Phone: (____) _____

Relationship: _____ Work Phone: (____) _____

EDUCATION

Check the highest level of education that you will have completed by the time you are planning to serve in AmeriCorps. (Check only one.)

Some high school Associate's Degree Graduate Degree

High school diploma or GED Some College Bachelor's Degree

Technical school/Apprenticeship other (please specify): _____

SKILLS AND EXPERIENCE

Listed below are skill areas that some programs find useful and may seek in AmeriCorps applicants. Indicate the skill areas in which you have had training or experience, including volunteer or community service experience, and indicate how you gained those skills.

EXAMPLE: X Public Speaking – Club President

<u> </u> Architectural Planning _____	<u> </u> Business/Entrepreneur _____
<u> </u> Communications _____	<u> </u> Community Org./Development _____
<u> </u> Computers/Technology _____	<u> </u> Conflict Resolution _____
<u> </u> Counseling _____	<u> </u> Education _____
<u> </u> Fine Arts/Crafts _____	<u> </u> First Aid _____
<u> </u> Fundraising/Grant Writing _____	<u> </u> Law _____
<u> </u> Leadership _____	<u> </u> Medicine _____
<u> </u> Public Health _____	<u> </u> Public Speaking _____
<u> </u> Recruitment _____	<u> </u> Teaching/Tutoring _____
<u> </u> Trade/Construction _____	<u> </u> Writing/Editing _____
<u> </u> Youth Development _____	<u> </u> Other (specify): _____

Do you have a valid driver’s license? Yes No License # _____ State _____

(This is a requirement for some AmeriCorps programs, but not all.)

CRIMINAL HISTORY

The AmeriCorps application process requires a criminal history check to ensure that community members with whom we work are protected, particularly children, individuals with disabilities, and individuals over 60 years old. We will investigate for past sexual offenses and violent crimes, or crimes that would have a direct bearing on your service.

This background check will entail our search of the National Sex Offenders Registry and an FBI criminal history check, which will require you being fingerprinted at Pre-Service Orientation.

You will not be permitted to serve or work with children, individuals with disabilities, or individuals over 60 years of age, without supervision until the history check is complete and you are cleared. The review process is not lengthy, and normally is completed within weeks.

Answer the following questions fully. Existence of a criminal conviction or juvenile 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.

Criminal History Consent/Authorization: I, _____ authorize criminal history background checks from the applicable state(s) and FBI agencies in relation to my AmeriCorps application, eligibility and service within this AmeriCorps Program.

Have you ever been convicted as an adult, 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 currently facing charges for any offense or on probation or parole? Yes No
If no, skip to “**Certification.**”

If you answered "yes" to any of the questions above, please provide the following information:

Date: _____ Place: _____
MO/DD/YEAR CITY/STATE

Charge: _____

Action Taken: _____

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

Name: _____

Address: _____
NUMBER AND STREET

_____ CITY STATE ZIP CODE

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

CERTIFICATION

If you choose to submit a paper application, your application must be certified with your original signature in ink. If you are applying to more than one AmeriCorps program, make a copy for each program and sign each one.

By signing this application, or by submitting it electronically if applying online, 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. Misinformation or omission of information could result in disqualification or termination as an AmeriCorps member. If I am selected for participation in some AmeriCorps programs, including AmeriCorps NCCC, I may be required to submit to a physical examination, including drug or alcohol testing. Background and security checks may also be conducted by some programs.

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 AmeriCorps and the Corporation for National and Community Service without your prior written permission.

Signature Date

Print Name: _____

Documents required with application: high school diploma and transcripts or GED certificate, copy of birth certificate, two reference letters, and current government issued legible photo ID to:

Sitting Bull College
Attn: GED Director
9299 HWY 24
Fort Yates, ND 58538

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.