

Dane County Department of Human Services Division of Prevention and Early Intervention



Partners for After School Success (PASS) A Community-Based AmeriCorps Program

PASS AmeriCorps Application 2023-2024 Service Year

PERSONAL INFORMATION

Name:					
Address:		State:	_Zip code: _		
Home phone:	Cell phon	e:			
Email address:					
What is the best way to contact you? _					
\square I am applying for a 1,700-hour full-tin \square I am applying for a 900-hour half-tim					
Are you a U.S. Citizen or Permanent R	esident?			☐ Yes ☐	□No
Have you successfully completed an A	meriCorps progran	n previously?		☐ Yes ☐	□No
When:	What program: _				
Did you earn an education	n award upon exit′	?		☐ Yes ☐	□No
Are you able/interested in serving at a s	site outside of Mad	dison?		☐ Yes ☐	□No
Do you have a preference of serving at If yes, which do you prefer?	<u></u>		nity Center	☐ Yes ☐	□No

HOW DID YOU HEAR ABOUT PASS?

EDUCATION INFORMATION

You may attach a résumé in lieu of completing the next three sections. Respond to questions not addressed in your résumé.

Name & Location of High School or GED program			Did you graduate?	Year diploma was granted	ł	
- 1 0						
Training Beyon	d High Schoo	ol .				
Name & Location			edits	Major Field 9 Democrats	Degrees	لد
Institution	From	To Ea	rned	Major Field & Remarks	Month & Year Receive	ea
		1				
	1	1	<u>l</u>			
Other	academic honors,	training or achieveme	nts that wi	ll be helpful in evaluating you	ur qualifications.	
PAID OR VOLU	NTEER WOR	K HISTORY				
Dates of Employment	Name & Cont	act Information of				
Month/Year		nployer		Job Title and Duties	Reason for Leaving	
May w e obtain references from your current or previous employers? ☐ Yes ☐ No If no, name and explain exceptions.						
If you were ever discharged for cause from employment, state the details.						

REFERENCES

Please list at least 3 work references familiar with your job qualifications (no relatives or personal friends)

Name	Email Address & Phone Number	Relationship to Applicant
<u>AVAILABILITY</u>		
week, M – F. Members provide extended learning programs member schedules may vary schedule outlined with the ho	rs serve between 38 – 40 hours, M - F. Half-time (de academic coaching during the school day, progrom 3:00 – 5:30 p.m. at school sites and 3:00 – 7 depending on availability. Members are responsiblest site. Members are allowed to work another job with PASS activities and responsibilities.	gram plan in the early afternoon and run :00 p.m. at community sites. Half-time ole for meeting their hours per the
If applying for a 1700 hour slo	ot, are you available to serve the required hours ar	nd schedule?
	, what other obligations will you have during the te th as much detail as you are able to provide at this	
ADDITIONAL SKILLS		
Do you speak a second langu If yes, which language(s)	uage?	☐ Yes ☐ No
Please list any other unique s	skills you have that would add to your qualification	S.

MOTIVATIONAL STATEMENT Please describe your motivation for serving as an AmeriCorps member with PASS. (Limit 500 words)

BACKGROUND CHECK AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

PASS/Dane County conducts background checks on applicants who make it to the final stages of the hiring process. Background checks require full-legal name, date of birth, and current and previous addresses. This information is used for background check purposes only.

Full Legal Name (include middle name):

Any Additional Names Used (maiden, nicknames, name changes, etc.):

Current & Previous Residences Please list the street addresses, cities, states, and zip codes where you have resided in the PAST FIVE years.

Record of Law Enforcement History

Date of Birth:

Have you ever been convicted of any violations of City Ordinances, State or Federal Law including traffic violations? This information will only be used if relevant to the position for which you are applying.

Date	Municipal/County/State	Law Violated	Disposition: Bail, Forfeited, Fined, Conviction, etc.

I have applied for a position with PASS AmeriCorps with the Dane County Department of Human Services. I authorize this department to run a complete and thorough criminal background check on me including an FBI fingerprint and state criminal registry checks. I also authorize individual police and/or sheriff's departments to release my records to the Dane County Department of Human Services. I authorize sharing these results within the program.

Please insert electronic signature. You will be asked to sign if intervie	ewed.	
Signature:	Date [.]	

Understanding & Authorization (Please Read Carefully Before Signing)

I CERTIFY THAT ALL ANSWERS ON THIS APPLICATION AND ANY ATTACHMENTS ARE TO THE BEST OF MY KNOWLEDGE TRUE AND THAT I HAVE NOT WITHHELD ANY PERTINENT INFORMATION.

I UNDERSTAND THAT ANY OMISSION, MISREPRESENTATION OR FALSE INFORMATION SUBMITTED IN CONNECTION WITH THIS APPLICATION MAY RESULT IN REFUSAL OF, OR DISMISSAL FROM THE PROGRAM.

I UNDERSTAND THAT IF ACCEPTED INTO THE PROGRAM THAT I WILL BE ENROLLED AS AN AMERICORPS MEMBER. ALL PASS AMERICORPS MEMBERS MUST BE U.S. CITIZENS OR PERMANENT RESIDENTALIENS, 17 YEARS OF AGE OR OLDER, AND COMMIT TO SERVING THE REQUIRED HOURS. FOR MORE INFORMATION ABOUT AMERICORPS GO TO: www.nationalservice.gov/programs/americorps.

I AUTHORIZE THE COUNTY TO INVESTIGATE MY RESPONSES ON THIS APPLICATION AND CONTACT ANY OR ALL OF MY FORMER EMPLOYERS OR ANY INDIVIDUALS FAMILIAR WITH ME OR MY EMPLOYMENT BACKGROUND FOR THE PURPOSE OF OBTAINING ANY INFORMATION, WHETHER FAVORABLE OR UNFAVORABLE, ABOUT ME OR MY EMPLOYMENT. I VOLUNTARILY AND KNOWINGLY FULLY RELEASE AND HOLD HARMLESS ANY PERSONS OR ORGANIZATION THAT PROVIDES INFORMATION PERTAINING TO MY EMPLOYMENT OR ME.

IN COMPLIANCE WITH STATE AND FEDERAL LAWS, DANE COUNTY DEPARTMENT OF HUMAN SERVICES AND PASS PARTNER AGENCIES DO NOT UNLAWFULLY DISCRIMINATE AGAINST ANY INDIVIDUAL ON THE BASIS OF AGE, RACE, CREED, COLOR, HANDICAP, MARITAL STATUS, SEX, SEXUAL ORIENTATION, NATIONAL ORIGIN, OR ANCESTRY.

Sign electronically if submitting by e-mail. You will be asked to sign if interviewed.

Signature:	Date:
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Please return your application and a résumé electronically to:

Bonnie Erickson
Dane County Human Services
erickson.bonnie@countyofdane.com