How to apply:
Position descriptions are available at [bur oaklandtrust.org/americorps-2019-20/](http://bur oaklandtrust.org/americorps-2019-20/). Complete the member application and send with your cover letter and resume to meredith@buroaklandtrust.org.

Incomplete applications will not be accepted. Multiple positions will be filled.

**Application deadlines:**
6-month Stewardship Technician position: January 10, 2020
3-month Stewardship Technician position: March 13, 2020
Applicants may apply for both positions.

**Service terms:**
6-month positions: February 17 through July 31, 2020
3-month positions: May 1 through July 31, 2020

**Application Checklist:**
- Member application
- Cover letter
- Resume

Applications are available to those who qualify and all qualifying individuals are encouraged to apply. To be eligible for AmeriCorps service, applicants must be at least 17 years old by the start of the service term, must be a United States citizen, national, or lawful permanent resident alien, and must pass federal criminal and sex offender registry background checks.

Reasonable accommodations: If you need to make a request for a reasonable accommodation due to a disability or other need, or have any additional questions, please contact AmeriCorps Program Director Meredith Roemeran at 319-338-7080 or meredith@buroaklandtrust.org.
Name: ________________________________________________________________

HOUSE NUMBER   STREET

Current Address: __________________________________________________________

CITY   STATE   ZIPCODE

Home Phone: (     )   Work Phone: (     )

Cell Phone: (     )   E-mail: ______________________________________________

HOUSE NUMBER   STREET

Permanent Address: _________________________________________________________

(if different than above)

CITY   STATE   ZIPCODE

Emergency Contact:

Name: ________________________________________________________________

Phone: (     )

Relationship: ___________________________________________________________
Check all positions for which you are applying:

- Bur Oak Land Trust – 6-month Stewardship Technician
- Bur Oak Land Trust – 3-month Stewardship Technician

Check the highest level of education that you will have completed by the start of the AmeriCorps term (check only one):

- High school diploma or GED
- Associate’s degree
- Bachelor’s degree
- Technical school/Apprenticeship
- Some college
- Graduate degree
- Other (please specify):

How did you hear about this position?

- College/University/School
- Ad in the local newspaper
- Huron Pines website
- Host organization announcement/website
- Current or former AmeriCorps member
- Friend/Family
- Other (Please list):

AmeriCorps is part of a national service program designed to strengthen citizenship and the ethic of service. What does community service mean to you?

To include additional information or questions, please attach a separate sheet.
Have you been involved in your community? If so, how have you been involved?

If you served in an organization, complete the following:

Organization name:
Total hours served:
Description of involvement:

To include additional information or questions, please attach a separate sheet.
Have you previously served in AmeriCorps?

- Yes (Check all that apply):
  - [ ] AmeriCorps
  - [ ] VISTA
  - [ ] AmeriCorps NCCC
  - [ ] AmeriCorps State and National
- [ ] No

If yes, list:

<table>
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<tr>
<th>CITY</th>
<th>STATE</th>
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Program location: ____________________________________________________________

MM/YYYY to MM/YYYY to MM/YYYY to MM/YYYY

Service term: ______________________________________________________________

Did you complete your service term?

- [ ] Yes
- [ ] No

If no, why not? Explain:
An FBI background check and Federal Sex Offender Registry check must be conducted for all AmeriCorps members. The existence of a criminal conviction/adjudication may or may not disqualify you from consideration, depending on the circumstances. However, any intentional misrepresentation or omission will disqualify you. You will be informed of the results of these checks. If the results disqualify you for service, you will have the opportunity to challenge the results. All results will be strictly confidential.

- Yes, I authorize Bur Oak Land Trust to conduct criminal history checks and sex offender registry checks.

Date of Birth: ________________________________

Place of Birth: ________________________________

- Male
- Female

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?

Registration number: ________________________________
Expiration date: ________________________________
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. 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: __________________________

Typing your name on the line signifies your electronic signature for this application.