



# Heart of Oregon Corps Application Form



Heart of Oregon Corps screens applicants based on their eligibility for our programs and their motivation to complete our programs. See [www.heartoforegon.org](http://www.heartoforegon.org) for due dates and eligibility information for various programs.

Questions? Call us at 541-633-7834. TYY/TDD: Dial 711

Alternate formats of this application are available upon request by contacting the Program Coordinator at Heart of Oregon Corps: 541-633-7834 or [info@heartoforegon.org](mailto:info@heartoforegon.org).

## Program Selection

Which Heart of Oregon Corps Program are you applying to?

- |                                      |                                       |                                     |
|--------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> AmeriCorps  | <input type="checkbox"/> Camp LEAD*   | <input type="checkbox"/> COYCC      |
| <input type="checkbox"/> Stewardship | <input type="checkbox"/> Thrift Store | <input type="checkbox"/> YouthBuild |

\*For Camp LEAD Applicants ONLY:

YTP Specialist, VR Counselor, Transition Specialist Name: \_\_\_\_\_

YTP Specialist, VR Counselor, Transition Specialist Phone Number: \_\_\_\_\_

## Contact Information

Full Legal Name: \_\_\_\_\_  
First Middle Last

Preferred Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Primary Email Address: \_\_\_\_\_

## Secondary Contact Information

Name: \_\_\_\_\_  
First Middle Last

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Relationship To You

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Parent/Legal Guardian | <input type="checkbox"/> Sibling                  | <input type="checkbox"/> Grandparent    |
| <input type="checkbox"/> Friend                | <input type="checkbox"/> Transition Specialist    | <input type="checkbox"/> Spouse/Partner |
| <input type="checkbox"/> Case Worker           | <input type="checkbox"/> Parole/Probation Officer | <input type="checkbox"/> Family Member  |

### Demographic Information

Date of Birth - Required: \_\_\_\_\_ Age at Time of Application: \_\_\_\_\_

Sex at Birth - Optional

Male

Female

Intersex

Race - Optional

African American or Black

Native American or Alaska Native

Asian

Native Hawaiian or Other Pacific Islander

White or European

Biracial/Multiracial

Ethnicity - Optional

Hispanic

Non-Hispanic

Citizenship Status - Required

Citizen of the United States

Non-Citizen of the United States

Lawful Permanent Resident

Alien Authorized to Work

What is your military, Veteran, or family member status? - Optional

I am a Veteran

I am an Active Duty Member of the United States Armed Forces

I am a member of the National Guard or Reserve Component

I am an immediate family member of a Veteran

I am an immediate family member of an Active Duty Member of the U.S. Armed Forces

I am an immediate family member of a National Guard or Reserve Component Member

I am not in the military, a Veteran, or a family member of someone in the U.S. Armed Forces

### Education History

Education History

Currently Attending High School

Dropped Out of High School

Graduated High School or Earned GED

Currently Attending College

Attended Some College

Graduated From College

If you're currently attending high school or a GED program, which one? \_\_\_\_\_

If you graduated from high school or a GED program, what year did you earn either? \_\_\_\_\_

Which certification did you earn?

GED

High School Diploma

Modified High School Diploma

### Recent History

In the last month, what were you doing?

- |   |  |
|---|--|
| <input type="checkbox"/> Employed Full Time                                   | <input type="checkbox"/> Providing Care to a Family Member         |
| <input type="checkbox"/> Employed Part Time                                   | <input type="checkbox"/> Attending School (High School or College) |
| <input type="checkbox"/> Unemployed   | <input type="checkbox"/> Participating in National Service         |
| <input type="checkbox"/> Serving in the Military, National Guard, or Reserves | <input type="checkbox"/> Other - Please Describe: _____            |

Most Recent Employer: \_\_\_\_\_

Start Date of Employment: \_\_\_\_\_ End Date of Employment: \_\_\_\_\_

Skills Learned: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### How Did You Hear About Us?

How did you hear about Heart of Oregon Corps?

- |   |  |
|---|--|
| <input type="checkbox"/> Probation/Parole Officer       | <input type="checkbox"/> Teacher/Guidance Counselor/YTP Specialist |
| <input type="checkbox"/> Current or Former Corps Member | <input type="checkbox"/> Community Agency                          |
| <input type="checkbox"/> Friends or Family              | <input type="checkbox"/> Facebook                                  |
| <input type="checkbox"/> Instagram                      | <input type="checkbox"/> Radio                                     |
| <input type="checkbox"/> SoundCloud                     | <input type="checkbox"/> Print Ad (Newspaper, etc.)                |
| <input type="checkbox"/> Research for Similar Programs  | <input type="checkbox"/> Craigslist or Job Site                    |

Have you ever been in a Heart of Oregon Corps Program before?

- Yes (Please Answer the Following Question)     No

Which Program(s) were you previously in?

- |                                      |                                       |                                     |
|--------------------------------------|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> AmeriCorps  | <input type="checkbox"/> Camp LEAD    | <input type="checkbox"/> COYCC      |
| <input type="checkbox"/> Stewardship | <input type="checkbox"/> Thrift Store | <input type="checkbox"/> YouthBuild |

Tell us why you want to join a Heart of Oregon Corps program, and what you hope to gain through your service.

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### Certification

I understand that this application may be the first step in a longer enrollment process. That process may include a background check, drug test, interview, and/or additional paperwork.

Heart of Oregon Corps is a drug free workplace and does not permit the use of tobacco products, alcohol, or drugs in our programs.

As a recipient of Federal financial assistance, Heart of Oregon Corps is prohibited from discriminating on the grounds of race, color, religion, gender, national origin, age, disability, political affiliation or belief, and against any beneficiary programs on the basis of the beneficiary's citizenship/status as a lawfully admitted immigrant authorized to work in the United States. Qualified individuals with disabilities and those from diverse backgrounds are strongly encouraged to apply. We provide reasonable accommodations for qualified individuals and conduct all activities in accessible settings (as allowed by program scope).

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Heart of Oregon Corps' YouthBuild project is funded by a grant awarded under the YouthBuild grant initiative, as implemented by the US Department of Labor's Employment and Training Administration.

HOC AmeriCorps Programs include eligibility to earn an education award (see specific program guidelines for details). All AmeriCorps Members serving under a covered position under CNCS in any HOC program must complete a multi-step procedure to ensure background check procedure compliance with CNCS. AmeriCorps positions are a national service opportunity, not "employment" or a "job".

I certify that all of the statements made in this application are true to the best of my knowledge.

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Your Signature

Date

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Parent/Guardian Signature (If Applicant is Under 18)

Date