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 for due dates and eligibility information for various programs.

Questions? Call us at 541-633-7834. TTY/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.

<table>
<thead>
<tr>
<th>Program Selection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which Heart of Oregon Corps Program are you applying to?</td>
</tr>
<tr>
<td>[ ] AmeriCorps</td>
</tr>
<tr>
<td>[ ] Stewardship</td>
</tr>
</tbody>
</table>

*For Camp LEAD Applicants ONLY:

YTP Specialist, VR Counselor, Transition Specialist Name: ____________________________

YTP Specialist, VR Counselor, Transition Specialist Phone Number: ______________________

<table>
<thead>
<tr>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Legal Name: ____________________________</td>
</tr>
<tr>
<td>First</td>
</tr>
</tbody>
</table>

| Preferred Name: ____________________________ |

| Cell Phone Number: ____________________________ | Home Phone Number: ____________________________ |

| Address: ____________________________ |

| City: ____________________________ | State: ____________________________ | Zip Code: ____________________________ | County: ____________________________ |

| Primary Email Address: ____________________________ |

<table>
<thead>
<tr>
<th>Secondary Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ____________________________</td>
</tr>
<tr>
<td>First</td>
</tr>
</tbody>
</table>

| Home Phone Number: ____________________________ | Cell Phone Number: ____________________________ |

<table>
<thead>
<tr>
<th>Relationship To You</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Parent/Legal Guardian</td>
</tr>
<tr>
<td>[ ] Friend</td>
</tr>
<tr>
<td>[ ] Case Worker</td>
</tr>
</tbody>
</table>
### 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?

- [ ] Employed Full Time
- [ ] Employed Part Time
- [ ] Unemployed
- [ ] Serving in the Military, National Guard, or Reserves
- [ ] Providing Care to a Family Member
- [ ] Attending School (High School or College)
- [ ] Participating in National Service
- [ ] Other - Please Describe: __________________________________________

<table>
<thead>
<tr>
<th>Most Recent Employer:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Start Date of Employment:</td>
<td></td>
</tr>
<tr>
<td>End Date of Employment:</td>
<td></td>
</tr>
<tr>
<td>Skills Learned:</td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving:</td>
<td></td>
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</tbody>
</table>

### How Did You Hear About Us?

How did you hear about Heart of Oregon Corps?

- [ ] Probation/Parole Officer
- [ ] Current or Former Corps Member
- [ ] Friends or Family
- [ ] Instagram
- [ ] SoundCloud
- [ ] Research for Similar Programs
- [ ] Teacher/Guidance Counselor/YTP Specialist
- [ ] Community Agency
- [ ] Facebook
- [ ] Radio
- [ ] Print Ad (Newspaper, etc.)
- [ ] 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?

- [ ] AmeriCorps
- [ ] Stewardship
- [ ] Camp LEAD
- [ ] Thrift Store
- [ ] COYCC
- [ ] YouthBuild

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

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
## 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.

<table>
<thead>
<tr>
<th>Your Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent/Guardian Signature (If Applicant is Under 18)</td>
<td>Date</td>
</tr>
</tbody>
</table>