

Applicant Name: _____

Criminal History

Have you ever been convicted as an adult, or adjudicated as a juvenile, 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? Yes No

If NO, please skip to the CERTIFICATION below. If you answered YES to any of the questions above, please provide the following information for each offense. Please use additional sheets for additional offenses.

Offense 1

Offense Date	Offense Location		
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Charge	Disposition		
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Explanation: *(If more space is needed, you may submit a written explanation on a separate sheet & attach to this application.)*

Are you currently on probation or parole for this charge? Yes No

PO Name	Phone Number		
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Address

City	State		Zip
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Offense 2

Offense Date	Offense Location		
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Charge	Disposition		
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Explanation: *(If more space is needed, you may submit a written explanation on a separate sheet & attach to this application.)*

Are you currently on probation or parole for this charge? Yes No

PO Name	Phone Number		
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Address

City	State		Zip
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Offense 3

Offense Date	Offense Location		
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Charge	Disposition		
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Explanation: *(If more space is needed, you may submit a written explanation on a separate sheet & attach to this application.)*

Are you currently on probation or parole for this charge? Yes No

PO Name	Phone Number		
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Address

City	State		Zip
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Certification

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 the ACCESS Project will require a National Service Criminal History check and a UNCG criminal background check, and sex offender registry search and I authorize for the aforementioned searches to be completed by the ACCESS Project. Acceptance into the program is contingent upon satisfactory results of the Criminal History checks. I understand that, if accepted, my participation in this program is contingent upon continued funding of the ACCESS Project by the Corporation for National and Community Service.

Signature	Date		
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For Parent or Guardian of Applicants under 18 Years of Age: I have reviewed this application and I authorize my son/daughter/legal ward to apply to AmeriCorps.

Signature	Date		
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Name	Relationship		
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Address

City	State		Zip
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Phone Number	
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