



American Red Cross

NATIONAL PREPAREDNESS & RESPONSE CORPS 2008 – 2009 APPLICATION FOR SERVICE

The 2008-2009 NPRC term of service will begin August 4, 2008 and conclude June 19, 2009.
Applications should be submitted to the appropriate chapter by June 30, 2008.

**THE FOLLOWING ARE THE 2008-2009 NATIONAL PREPAREDNESS & RESPONSE CORPS SITES.
PLEASE SUBMIT YOUR APPLICATION TO THE CORRESPONDING CONTACT LISTED ON PAGE 9.**

- | | | |
|---|--|---|
| <input type="checkbox"/> San Francisco Bay Area, CA | <input type="checkbox"/> Peoria, IL | <input type="checkbox"/> New York, NY |
| <input type="checkbox"/> Santa Barbara, CA | <input type="checkbox"/> Springfield, IL | <input type="checkbox"/> Tulsa, OK |
| <input type="checkbox"/> Greenwich, CT | <input type="checkbox"/> New Orleans, LA | <input type="checkbox"/> Philadelphia, PA |
| <input type="checkbox"/> Atlanta, GA | <input type="checkbox"/> Baltimore, MD | <input type="checkbox"/> Richmond, VA |
| <input type="checkbox"/> Cedar Rapids, IA | <input type="checkbox"/> St. Louis, MO | <input type="checkbox"/> Seattle, WA |
| <input type="checkbox"/> Chicago, IL | <input type="checkbox"/> Charlotte, NC | |

INSTRUCTIONS

- Please type or print information clearly.
- If additional space is needed, please attach 8.5" x 11" pages only.
- Include your name on the top right corner of each additional page.

LOCATION OF CHOICE: _____

I. APPLICANT PROFILE

LAST NAME,		FIRST NAME	
CURRENT STREET ADDRESS (INCLUDE APARTMENT NUMBER, IF ANY)			HOME PHONE
CITY	STATE	ZIP	CURRENT ADDRESS VALID UNTIL
PERMANENT STREET ADDRESS			ALTERNATE PHONE
CITY	STATE	ZIP	BIRTH DATE
E-MAIL			

Date of Application: _____

II. GENERAL INFORMATION

Have you previously been employed by the American Red Cross or been a Red Cross Volunteer?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Location/Department:	Position:
From:	To:

Have you previously served as an AmeriCorps member?				
Yes <input type="checkbox"/>	No <input type="checkbox"/>			
VISTA <input type="checkbox"/>	NCCC <input type="checkbox"/>	State Commission funded <input type="checkbox"/>	National Direct <input type="checkbox"/>	Tribes/Territories <input type="checkbox"/>
AmeriCorps Program Name:				
Service Dates From: _____	To: _____			
Candidates who have previously served two AmeriCorps terms with a National Direct, State Commission funded, or Tribe/Territory program are not eligible for to serve a third AmeriCorps term with the NPRC program.				

Are you at least 18 years of age?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
All applicants must be 18 years old by the NPRC program start date.	

If accepted, can you provide proof that you are a citizen or lawful permanent resident alien of the United States*? *To be eligible for AmeriCorps service, you <u>must</u> be a US Citizen, U.S. National, or lawful permanent resident alien of the US.	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Assignments with the National Preparedness & Response Corps will involve driving. Do you currently hold a valid driver's license?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Driver's License Number:	State:
Expiration date:	
All applicants must possess a current and valid driver's license by the NPRC program start date.	
Prior to acceptance the Red Cross Chapter will require a current DMV report. Proof of personal automobile insurance is also required to operate an American Red Cross vehicle while in the NPRC.	

Have you ever been convicted of any offense other than a minor traffic violation in the last seven (7) years?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, give dates and circumstances on a separate sheet of paper.	
A conviction will not necessarily disqualify you - false or misleading information will.	

III. EMPLOYMENT RECORD

Please list and describe your employment positions. Begin with your most recent employment. Do not list AmeriCorps or other national service experience. Be clear, concise, and complete. Include accomplishments and leadership experience. If necessary, you may attach additional pages.

1. COMPANY/ORGANIZATION:	DATES month/year i.e., 05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:
2. COMPANY/ORGANIZATION:	DATES month/year i.e.05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:
3. COMPANY/ORGANIZATION:	DATES month/year i.e., 05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:

IV. COMMUNITY ACTIVITIES

Please list and describe your volunteer or community service experience, including AmeriCorps, religious groups, and other organizations. Do not list experience previously recorded in Section III. Be clear, concise, and complete. If necessary, you may attach additional pages.

1. AGENCY/ORGANIZATION:	DATES month/year i.e., 05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:
2. AGENCY/ORGANIZATION:	DATES month/year i.e., 05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:
3. AGENCY/ORGANIZATION:	DATES month/year i.e., 05/2006	TITLE:
ADDRESS:	FROM:	DUTIES AND ACCOMPLISHMENTS:
	TO:	
SUPERVISOR:		
TELEPHONE NUMBER:		EMAIL ADDRESS:

V. EDUCATIONAL BACKGROUND

Please list all schools attended, training completed, and job-related professional licenses and certifications.

	NAME CITY AND STATE	MAJOR/MINOR AREA OF STUDY	DEGREE	DATE COMPLETED
HIGH SCHOOL				
UNDERGRADUATE				
GRADUATE				
OTHER (TRADE)				
TRAINING (INCLUDE RED CROSS)				
	TYPE	NUMBER/STATE	DATE ISSUED	DATE EXPIRES
LICENSES				

VI. LANGUAGE SKILLS

Assignments with the National Preparedness and Response Corps may require providing service to persons with limited English proficiency. Language needs include Spanish, Korean, Tagalog, Armenian, Chinese, American Sign Language, and Russian. Please list languages other than English. Check all appropriate boxes.

LANGUAGE(S)	READ Y/N	WRITE Y/N	UNDERSTAND Y/N	COMFORTABLE MAKING PRESENTATIONS IN THIS LANGUAGE? Y/N
1.				
2.				
3.				

VIII. PERSONAL STATEMENT

Service with the National Preparedness and Response Corps and disaster assignments require applicants who are dedicated, flexible, and can accomplish multiple tasks with a variety of groups. On separate sheets of paper please respond to the following questions. **Limit 300 words for each response.**

1. Why would you like to be involved with the American Red Cross National Preparedness and Response Corps?
2. Describe a time when you have used teamwork to get things done.

VIII. LETTER OF SUPPORT AND REFERENCES

Please submit at least one letter of support from an individual who has observed your performance in a community service or leadership activity.

Provide the names and daytime telephone numbers of two additional people, not related to you, who are familiar with your qualifications. **At least one should be a former supervisor.**

1. NAME: _____
 DAYTIME TELEPHONE NUMBER: _____
 ALTERNATE TELEPHONE NUMBER: _____
 EMAIL ADDRESS: _____
2. NAME: _____
 DAYTIME TELEPHONE NUMBER: _____
 ALTERNATE TELEPHONE NUMBER: _____
 EMAIL ADDRESS: _____

IX. RECRUITMENT SOURCE

How did you hear about the National Preparedness and Response Corps? Please indicate one of the following:

Through your college/university? Please specify.	Through a current AmeriCorps program? Please specify.
Through a local recruitment system? Please specify.	World wide web? Please specify web page.
Other? Please specify.	

X. CERTIFICATION AND AGREEMENT

Please read carefully before signing.

The American Red Cross is an equal opportunity employer, and does not discriminate on the basis of sex, race, color, religion, national origin, ancestry, age, marital status, sexual orientation, medical condition, veteran status, nor against any disabled veterans, veterans of the Vietnam War, or qualified individuals with physical or mental disability. I understand that any offer of acceptance is contingent on satisfactory reference, employment and criminal checks, and acceptance by a bonding company, if applicable.

I certify that all statements I made on the application are true and complete to the best of my knowledge, and I have withheld nothing that would affect the American Red Cross' decision to accept me. I understand that misinformation or omission of information could result in disqualification and/or termination as an AmeriCorps member, regardless when they are discovered. I acknowledge that I have read the above statements and understand them. I authorize the Red Cross to solicit and obtain from former employers, colleagues, and other persons who know me, information that would be helpful in making decisions about my selection, and I release such parties from any liability regarding such disclosure.

SIGNATURE: _____
(DO NOT PRINT)

DATE: _____

XI. APPLICATION CHECKLIST

Your application packet should include all of the following:

- One (1) original application
- Responses to the Personal Statement (Item VII)
- At least one Letter of Support (Item VIII)
- Application Data Form (optional)

XII. APPLICATION ADDRESS

Return completed application to the operating site (chapter) you prefer. See contact list on page 9.



American Red Cross

Invitation for Self Identification For Applicants

The American Red Cross is an equal opportunity employer. In recognition of its responsibility to its paid and volunteer staff, and the community it serves, the Red Cross affirms its policy to assure fair and equal treatment in all of its employment practices for all persons. We consider applicants for all positions without regard to race, color, religion, sex, age, national origin, disabled or veteran status, or other legally protected status. To help us track our organizational success, we ask your assistance in filling out this voluntary self-identification form. In addition to our internal tracking, the Red Cross must meet government record-keeping and reporting requirements.

Completion of this form is voluntary, and will not affect your application for serving as an AmeriCorps member with the Red Cross.

Name

Date

Position applying for:

Check all that apply:

Female

Male

White, Not Hispanic

Black or African – American, Not Hispanic

Hispanic or Latino

Asian or Pacific Islander

American Indian or Alaskan Native

Vietnam Era Veteran: A veteran who:(1) served on active duty for more than 180 days any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released with other than a dishonorable discharge, or (2) was discharged or released from active duty for a service-connected disability if any part of such active duty was performed between August 5, 1964 and May 7, 1975.

Other Protected Veteran: Veteran's who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.

American Red Cross
AmeriCorps National Preparedness & Response Corps
2008-2009 Operating Site Contact List for Applicants

American Red Cross

Bay Area Chapter

c/o Rita Chick
85 Second Street, 8th Floor
San Francisco, CA 94105
(415) 427-8122 (fax)

E-mail: chickr@usa.redcross.org

American Red Cross

Santa Barbara County Chapter

c/o Louise Kolbert
2707 State Street
Santa Barbara, CA 93105-3567
(805) 682-4655 (fax)

E-mail: lkolbert@sbredcross.org

American Red Cross of Greenwich

c/o Tim Wall
99 Indian Field Road
Greenwich, CT 06830
(203) 869-0192 (fax)

E-mail: wallt@usa.redcross.org

American Red Cross

Metropolitan Atlanta Chapter

c/o Sandra Hallen
1955 Monroe Dr. NE
Atlanta, GA 30324
(404) 575-3086 (fax)

E-mail: shallen@arcatl.org

American Red Cross

Grant Wood Area Chapter

c/o Tina Coleman
P.O. Box 10375
Cedar Rapids, IA 52410
(319) 393-1841 (fax)

E-mail: Colemant@grantwood-redcross.org

American Red Cross of Greater Chicago

c/o Kat Hindmand
2200 W. Harrison
Chicago, IL 60612
(312) 729-6303 (fax)

E-mail: hindmandk@usa.redcross.org

American Red Cross

Central Illinois Chapter

c/o Kara Johnston, Human Resources
311 W. John Gwynn Ave.
Peoria, IL 61605
(309) 677-7283 (fax)

E-mail: kjohnston@redcrossillinois.org

American Red Cross

Illinois Capital Area Chapter

c/o Colleen Stone
1045 Outer Park Dr.
Springfield, IL 62704
Fax (217) 787-7952

E-mail: cstone@il-redcross.org

American Red Cross

South East Louisiana Chapter

c/o Melissa Horne, Human Resources Director
3131 N. I – 10 Svc. Rd. East, 4th floor
Metairie, LA 70002
504-827-2361 (fax)

E-mail: mhorne@arcno.org

American Red Cross

Central Maryland Chapter

c/o Darlene Scribner
4800 Mount Hope Drive
Baltimore, MD 21215
410-585-2431 (fax)

E-mail: dscribner@ARC-CMC.org

American Red Cross

St. Louis Area Chapter

c/o Cindy Artz
10195 Corporate Square Dr.
St. Louis, MO 63132
314-516-2847 (fax)

E-mail: cartz@redcrossstl.org

American Red Cross

Greater Carolinas Chapter

c/o Katrina Johnson
2401 Park Rd.
Charlotte, NC 28203
(704) 378-4633 (fax)

E-mail: JohnsonKatri@usa.redcross.org

American Red Cross of Greater New York

c/o David Dunn
520 W. 49th Street
New York, NY 10019
(212) 875-2237 (fax)

E-mail: dunnd@nyredcross.org

American Red Cross

Tulsa Area Chapter

c/o Kaylene Keener
10151 E. 11th St.
Tulsa, OK 74128
(918) 831-1629 (fax)

E-mail: kkeener@arctac.org

American Red Cross

Southeastern Pennsylvania Chapter

c/o Sarah Rissinger
2300 Chestnut Street
Philadelphia, PA 19103
(215) 751-0995 (fax)

E-mail: rissingers@redcross-philly.org

American Red Cross of Greater Richmond

c/o Paul Hundley
420 East Cary Street
Richmond, VA 23219-3816
(804) 649-2131 (fax)

E-mail: hundleyp@usa.redcross.org

American Red Cross serving King & Kitsap Counties

c/o Nancy Watchie
P.O. Box 3097
Seattle, WA 98114
206-325-8211 (fax)

E-mail: nancy.watchie@seattlredcross.org