



# Palouse-Clearwater Environmental Institute

## Individual Placement Program

### Authorization/ Eligibility Form

#### 1. High School Agreement

I declare under penalty of law that:

- I have received a high school diploma or its equivalent; or
- I agree to obtain a high school diploma or its equivalent and did not drop out of elementary or secondary school to enroll in the program; or
- I am enrolled in an institution of higher education on an ability to benefit basis and am eligible for federal student financial assistance.

#### 2. Criminal Background Check Authorization

I understand my enrollment as a PCEI AmeriCorps member is conditional upon receipt of a satisfactory report from the State Patrol in the state in which I will be serving or an FBI criminal identification system and upon a satisfactory report from the National Sex Offender Registry.

- I agree to allow an appropriate agency to conduct a State Patrol check or obtain a set of my fingerprints for the purpose of conducting a report of criminal felony convictions within the last ten years, as well as any offenses against persons, civil adjudication of child abuse, and a disciplinary board's final decision.
- I do not agree.

#### 3. Loan Forbearance Eligibility

I understand that as an AmeriCorps member, I am eligible to have the repayment of certain student loans(s) postponed while I am earning an education award. I understand that I must confirm this forbearance with my loan holder(s). I further understand that the interest amount the Corporation pays on my behalf is taxable and will be reported to the Internal Revenue Service (IRS).

- I am requesting forbearance and understand it is my responsibility to apply for it at [www.my.americorps.gov](http://www.my.americorps.gov)
- I do not need loan forbearance at this time.

#### 4. Child Care Agreement

If I am the parent or legal guardian of a child residing with me who is under the age of 13, and I do not receive child care subsidies from any other source, I may be eligible for assistance with child care costs during my AmeriCorps term. If I become eligible during my term of service, I may enroll at that time. I understand that if I submit an application to AmeriCorpsCARE for child care benefits, I must inform PCEI and provide the program with copies of all forms submitted. I also understand it is my responsibility to inform PCEI of any change in my eligibility.

<http://www.naccetra.org/ameriCorps/index.php>

- I may be eligible for child care assistance and will pursue it with the help of PCEI staff.
- I am not eligible and/or do not wish to receive child care assistance.

#### 5. Publicity Release

My AmeriCorps service may merit publication in professional journals and newspapers or broadcast on television.

- I give permission to PCEI to use my name, photograph and other identifying information for publicity, promotional, or other purposes.
- I do not give permission.



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**6. Permission to Release Information**

Routine inquiries and reference checks will be handled in the following way (select one or more):

- PCEI may provide information to outside agencies and businesses pertaining to enrollment in PCEI AmeriCorps programs and the length of service and type of service performed, i.e. employment references.
- PCEI may provide my address and phone number to other AmeriCorps members.
- PCEI programs may NOT provide information to anyone.

**7. Education Award Eligibility Agreement**

I, \_\_\_\_\_, have not previously served in a National Service program as an AmeriCorps\*USA member, an AmeriCorps\*VISTA member, an AmeriCorps\*NCCC or an AmeriCorps Promise Fellow. I understand that it is my responsibility to inform PCC of any previous terms of service and that PCC is not liable for providing an Education Award to me if I am not eligible under Corporation for National and Community Service guidelines.

**OR**

I, \_\_\_\_\_, have served in the following National Service programs:

1. Position \_\_\_\_\_  
 Program Name \_\_\_\_\_  
 Program Address \_\_\_\_\_  
 Term of Service Dates \_\_\_\_\_
2. Position \_\_\_\_\_  
 Program Name \_\_\_\_\_  
 Program Address \_\_\_\_\_  
 Term of Service Dates \_\_\_\_\_

I, \_\_\_\_\_, understand that I am eligible to receive an Education Award for my FIRST TWO terms of national service only. If my term of service with the Palouse-Clearwater Environmental Institute is a third term, I understand that I will not receive an Education Award for my service

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian (if member is under 18) \_\_\_\_\_ Date \_\_\_\_\_