

# MEMBER AGREEMENT AUTHORIZATION AND CERTIFICATION

(Please read the "Member Agreement" in the Enrollment Paperwork section before completing this form)

## AUTHORIZATION

The member commits to the following Term of Service (circle one): **300** **450**

The member is currently enrolled at: \_\_\_\_\_  
College or University

Please answer the following questions fully. Existence of criminal conviction/adjudication may or may not, depending on the circumstances, disqualify you from consideration. However, any intentional misrepresentation or omission will disqualify you. Do not include minor traffic violations.

1. Have you ever been convicted, or adjudicated as a juvenile offender, of any criminal offense by either a civilian or military court, other than minor traffic violations? **Yes No**
2. Are you now under charges for any offenses? **Yes No**
3. Are you now on probation or parole? **Yes No**

If no, skip to CERTIFICATION below.

If you answered yes to any of the questions above, please provide the following information:

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Charge: \_\_\_\_\_ Action Taken: \_\_\_\_\_

## CERTIFICATION

The Member hereby acknowledges by his/her signature that s/he has read, understands, and agrees to all terms and conditions of the Member Agreement. (If the member is **under 18 years of age**, the member's parent or legal guardian must also sign.)

**AmeriCorps Member :** \_\_\_\_\_  
Signature Print Name Date

**Parent/Legal Guardian:** \_\_\_\_\_  
Signature Print Name Date

## Publicity Information Release

I give Montana Campus Compact and the Community Partners program permission to use my program information (e.g., "Great Stories", innovative programs, name/photograph associated with program information, etc.) for publicity and/or marketing purposes. **Initial if in agreement:** \_\_\_\_\_.

## Work Study Placements

Please check the appropriate box(es): All or part of your direct service hours will be accrued through:

- \_\_\_\_\_ A Federally funded, service-related Work Study position  
\_\_\_\_\_ A State-funded, service-related Work Study position  
\_\_\_\_\_ A Veterans Affairs-funded Work Study position

## Volunteer Recruitment/Management

\_\_\_\_\_ Check if you plan to recruit and/or manage volunteers during your AmeriCorps Term of Service

## TO BE COMPLETED BY CAMPUS COMPACT STAFF ONLY:

**Member Start Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Member End Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(program orientation/enrollment date) (anticipated exit date)

**Campus Compact Certifying Official:** \_\_\_\_\_  
Signature Print name Date