

# MAI AMERICORPS CERTIFICATION FORM

**This form must be signed with your original signature in ink.**

I certify that all of the statements made in my AmeriCorps 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 authorize Mt. Adams Institute to investigate any information provided in my application, to check the references I have provided and to check with any other person who may have information relevant to my qualifications for positions with Mt. Adams Institute. I realize that this information may be shared with potential partners.

I further authorize my current and past employers or anyone with information concerning my work history, education or qualifications to provide such information to Mt. Adams Institute in response to inquiries. I agree to hold harmless from any claim of liability on my behalf anyone supplying such information to Mt. Adams Institute.

Furthermore, I understand that if I am offered a position with Mt. Adams Institute, such offer will be conditional upon receipt of a satisfactory report from the FBI criminal identification systems. I agree to allow an appropriate agency to obtain a set of my fingerprints for the purpose of conducting a report of criminal felony convictions, as well as any offenses against persons, civil adjudication's of child abuse, and a disciplinary board's final decision.

**PRIVACY ACT NOTICE:** The Privacy Act of 1974 (5 U.S.C & 552a) requires that the following notice be provided to you: The authority for collecting information from you in this application is contained in 42 U.S.C 12592 and 12615 of the National and Community Service Act of 1990 as amended, and 42 U.S.C 4953 of the Domestic Volunteer Service Act of 1973 as amended. You are advised that submission of the information is entirely voluntary, but the requested information is required in order for you to participate in AmeriCorps programs.

\_\_\_\_\_  
CLEARLY PRINT YOUR NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

## MAI Recruitment Contact:

**Katie Schmidt**

[recruitment@mtadamsinstitute.com](mailto:recruitment@mtadamsinstitute.com)

Mt. Adams Institute  
2453 Hwy. 141  
Trout Lake, WA 98650  
(509) 395-3465