



# UCAN Serve Education Award Program

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## Service Summary/Application

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Date of birth: \_\_\_\_\_ SS# \_\_\_\_\_  
Month Day Year

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Student Level: \_\_\_\_\_ GPA: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_

College/University: \_\_\_\_\_

Department: \_\_\_\_\_

Degree and Major: \_\_\_\_\_

Service Site (s): \_\_\_\_\_

Applying for:  300 Hour  450 Hour  900 Hour Scholarship (mark one)

Anticipated Start Date of Service: \_\_\_\_\_ Anticipated End Date of Service: \_\_\_\_\_

Previous AmeriCorps Scholarship Awards?  No  Yes

If "Yes," what was the award amount, date, university, and location of service?

Goal Area (circle one):    Education    Public Health & Safety    Community Strengthening

**Summarize your community-based project(s). Please write a brief description of your service:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Departmental Supervisor/Sponsor Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Address** \_\_\_\_\_

**Work Phone** \_\_\_\_\_

**Work E-mail** \_\_\_\_\_

**I agree to serve as the supervisor/sponsor for \_\_\_\_\_ for his/her AmeriCorps Education Award.**

**Supervisor Signature** \_\_\_\_\_

**Pre-Service Reflection**

*Please take some time to answer the following guiding questions:*

**What motivates you to pursue this term of service in AmeriCorps?**

**How does your participation in AmeriCorps relate to your professional/personal goals?**

**In what ways do your professional/personal goals support lifelong involvement in your community?**

**What do you consider to be the greatest challenge you will encounter in this service/fieldwork role?**