# **Employers of National Service Enrollment Form**

**OMB** Control Number:

# **Expiration Date:**

PUBLIC BURDEN STATEMENT: Public reporting burden for this collection of information is estimated to average 25 hours per submission, including reviewing instructions, gathering and maintaining the data needed, and completing the form. Comments on the burden or content of this instrument may be sent to the Corporation for National and Community Service, Attn: Amy Borgstrom, 1201 New York Avenue, NW, Washington, D.C. 20525. CNCS informs people who may respond to this collection of information that they are not required to respond to the collection of information unless the OMB control number and expiration date displayed on page 1 are current and valid. (See 5 C.F.R. 1320.5(b)(2)(i).)

# Employers of National Service Member Information



The Corporation for National and Community Service, which administers AmeriCorps, and its partners — Peace Corps, AmeriCorps Alums, National Peace Corps Association, and The Franklin Project — have launched Employers of National Service to better connect national service alumni with opportunities in the workforce. We are asking employers to share the following information with us.

Instructions:

- We encourage you to first review all the items before you begin entering information. Unfortunately, you cannot save and return to this form.
- · Please note that items marked with an asterisk (\*) are required.
- If you have any feedback to share about this form, please do so in the comments box at the end of this form.

After submission, you will receive confirmation of your enrollment within five business days. Thank you!

1. Employer Name \*

## 2. Employer Description \*

Briefly describe your organization (1-2 sentences).

### 3. Employer Type \*

- Private Sector
- Nonprofit Organization
- Institution of Higher Education
- School District
- State or Local Government
- Federal Government
- Other (describe below)

### 4. Employer Location

Street Address *	
f your organization has multiple locations, please provide your headquarters' add	ress
Street Address (Line 2)	
City *	
State *	_
Zip Code *	
Additional Location(s)	

If your organization has multiple locations, list them here (in the US, city and state only; internationally, country only). Please do not include affiliates.

# 5. Workforce Information

Below, please include permanent full- and part-time staff only, including paid fellows or apprentices. Exclude seasonal staff, student employees, interns, volunteers, and national service participants (ie, AmeriCorps members).

Current number of employees at your organization \*

### Number of employees hired in the previous calendar year

If data is only available by fiscal year, please note this in the comments box at the end of this form. If unavailable, please leave blank.

### Current number of AmeriCorps, Peace Corps, or other national service alumni on staff

If unknown, please leave blank.

# 6. What is your organization committing to do as an Employer of National Service? Please check all that apply. \*

In job postings, include language encouraging AmeriCorps, Peace Corps, and national service alumni to apply

On job applications, incorporate a check box for AmeriCorps, Peace Corps, and national service alumni

Note: Organizations that are Employers of National Service will be asked to report annually about the number of applications, interviews, and hires who have served in AmeriCorps or Peace Corps.

If your organization is interested in implementing additional steps (such as providing special hiring consideration, guaranteeing interviews, or creating positions exclusively for national service alumni), please describe below.

If you are interested in ONLY implementing an action different from the two basic options listed above, please email employers@cns.gov and describe your proposal.

### 7. Contact Information for Programmatic Coordinator

Typically involved in human resources, this person will be directly involved in implementing Employers of National Service at your organization.

Name *			
Title *			
Phone *			
Email *			

### 8. Contact Information for Partnerships Coordinator

Please indicate the person who leads your organization's partnership-related efforts.

## 9. Contact Information for Media Coordinator

We may contact your media coordinator ahead of large events or for press outreach relating to Employers of National Service.

Name *	 	 	
Title *			
Phone *			
Email *			

### 10. Organization Career Page \*

We will link to this page directly from our website.

11. Quote (Optional). Statement from the head of your organization (or another senior leader) about Employers of National Service. Please include why you believe that AmeriCorps and Peace Corps alumni have important skills and make good employees.



## 12. How did you hear about Employers of National Service?\*

- AmeriCorps Alums
- Corporation for National and Community Service
- National Peace Corps Association
- Peace Corps
- The Franklin Project
- Other

### Please specify the source of information: \*

This could be an individual, office, event, mailing, etc.

#### Optional Comments



If you had trouble filling out any of the fields or have feedback to share about this form, please enter it her Thank you for your support of national service!

