

Service Opportunity Listing Template

Use this optional template to develop and draft your service opportunity listing prior to inputting the information into eGrants. Service opportunity listings cannot be partially saved throughout the input process. Thus this template provides the option to work on a new service opportunity listing at your own pace.

Public Health AmeriCorps (PHA) Grantees: Please select “Public Health AmeriCorps” in the field of service areas in which your members are serving (designated under PAGE 3 below) so that your program is filtered under this designation during an applicant program search.

* = Required field by eGrants

** = Required field by AmeriCorps

Question or Prompt	Response or Selection
PAGE ONE	
** Do you want to make this Listing to be available now? <i>Select: Yes or No</i>	
* Project Name:	
* Project Type: <i>Select: AmeriCorps State / National (dropdown)</i>	
* Program Code: <i>Select: Program Code (dropdown)</i>	
* Start Date:	
* End Date:	
* Term of Service: <i>Select one: Full-Time, Part-Time, or Summer</i>	
* First Name	
* Last Name:	
* Street Address1:	
Street Address2:	
* City:	
* State:	
* Zip:	
* Contact Phone:	
E-mail:	
Fax Number:	
Website:	

*In what states will you have members? <i>Select: State(s) and/or territories (dropdown)</i>	
In what metropolitan area will you have members? <i>Select: Metro area(s) (dropdown)</i>	
PAGE TWO	
*Give a brief two (2) line description of the program (200 characters or less):	
*Enter your program description (2000 characters or less):	
*Are you accepting applications now? <i>Select: Yes or No</i>	
**Accepting applications from:	
**Application deadline:	
*Do you accept AmeriCorps application? <i>Select: Yes or No</i>	
If you require your own application, how do applicants get it?	
Phone:	
E-mail:	
Website:	
<p>**What benefits does your program offer?</p> <p>Full Time (Select at a minimum):</p> <ul style="list-style-type: none"> • Childcare assistance if eligible • Education award upon successful completion of service • Health coverage • Stipend or Living Allowance <p>• If the program is an Education Award Only program, Program Benefits do not need to include living allowance or health coverage.</p> <p>• If the program is a Professional Corps program, Program Benefits do not need to include living allowance, health coverage, or childcare assistance.</p> <p>Part time, Summer, Less than Full Time (Select at a minimum):</p> <ul style="list-style-type: none"> • Education Award upon successful completion of service <p>Other Benefits:</p> <ul style="list-style-type: none"> • Housing • Relocation Allowance • Training • Other (fill in the blank) <p>Note: AmeriCorps State and National members are not eligible for Choice of Education Award of End of Service Stipend</p>	
Select the terms and conditions of member service that apply to your program? <i>Options include:</i>	
<ul style="list-style-type: none"> • Car recommended • Permits attendance at school during off hours 	

<ul style="list-style-type: none"> • <i>Permits working at another job during off hours</i> • <i>Prohibits paid work outside of the sponsoring agency at any time</i> • <i>Uniforms provided and required</i> 	
<p>PAGE THREE</p>	
<p>**Minimum Age: <i>Generally minimum age should be 17 or above; there are exceptions for approved opportunity youth programs.</i></p>	
<p>**Maximum Age: <i>Generally maximum age should be 99 or none; there are exceptions for approved youth corps programs.</i></p>	
<p>Desired Education Level: <i>Select one: Education Level (dropdown)</i></p> <ul style="list-style-type: none"> • <i>Associates Degree</i> • <i>College Graduate</i> • <i>Some College</i> • <i>Graduate Degree</i> • <i>High School Diploma/GED</i> • <i>Less than High School</i> • <i>Technical school/apprenticeship/vocational</i> 	
<p>What skills would you like potential members to possess? <i>Select: Skill(s) (dropdown)</i></p> <ul style="list-style-type: none"> • <i>Counseling</i> • <i>Architectural Planning</i> • <i>Business/Entrepreneur</i> • <i>Communications</i> • <i>Community Organization</i> • <i>Computers/technology</i> • <i>Conflict Resolution</i> • <i>Education</i> • <i>Fine Arts/Crafts</i> • <i>First Aid</i> • <i>Fund raising/Grant Writing</i> • <i>Law</i> • <i>Leadership</i> • <i>Medicine</i> • <i>Public Health AmeriCorps</i> • <i>Public Speaking</i> • <i>Recruitment</i> • <i>Teaching/Tutoring</i> • <i>Trade/Construction</i> • <i>Writing/Editing</i> • <i>Youth Development</i> • <i>General Skills</i> • <i>Environment</i> • <i>Non-Profit management</i> • <i>Social Service</i> • <i>Urban Planning</i> • <i>Disaster Services</i> • <i>Veterans</i> • <i>Team Work</i> 	
<p>Do you have a language requirement? <i>Select: Language(s) (drop down)</i></p>	
<p>*What will your AmeriCorps member(s) do? (1000 characters or less):</p>	

<p>Define the field of service areas in which your members are serving? *PHA Grantees: You must select Public Health AmeriCorps here.</p> <p>Select: Service Area(s) (dropdown)</p> <ul style="list-style-type: none"> • Community and Economic Development • Community Outreach • Children/Youth • Disaster Relief • Education • Entrepreneur/Business • Elder Care • Ex-Offender Reentry • Environment • Health • Hunger • Hurricane Katrina • Homelessness • Housing • Homeland Security • Neighborhood Revitalization • Public Health AmeriCorps • Public Safety • Technology • Tribal • Veterans 	
<p>*Explain the purpose of modification</p>	
<p>Submitted by:</p>	
<p>*First Name:</p>	
<p>*Last Name:</p>	
<p>Your phone number:</p>	
<p>Your E-mail address:</p>	