



**SERVE
ILLINOIS**

**Commission on Volunteerism
and Community Service**

**AmeriCorps
Member File Checklist**

Program Name/Location: _____

Member Name: _____

| Are the following items in the Member's file? | YES | NO |
|--|-----|----|
| Member application | | |
| Member enrollment form signed and dated if not submitted electronically | | |
| Proof of age (Driver's license, birth certificate, etc.) | | |
| Parental consent form (If member is under 18) | | |
| Signed Member contract that stipulates the following: | | |
| the minimum number of service hours and other requirements necessary for completion and education award; | | |
| acceptable conduct; | | |
| prohibited activities; | | |
| requirements under the Drug-Free Workplace Act (41 U.S.C. §701 <i>et seq.</i>); | | |
| suspension and termination rules; | | |
| the specific circumstances under which a member may be released for cause; | | |
| the position description; | | |
| ensure members do not participate in prohibited activities | | |
| grievance procedures; | | |
| other requirements as established by the Program. | | |
| Criminal background check: | | |
| Where background issues reviewed by the program prior to enrollment? | | |
| Timesheets | | |
| Is there an electronic submission document with member signature and procedure? | | |
| Are they up to date? | | |
| Do the timesheets track training, fundraising, and service hours separately? | | |
| Does the Oncorps report match the member timesheet? | | |
| Documentation of citizenship/naturalization/resident alien status: | | |
| Documentation of Health Care Enrollment (Full Time Member): | | |
| Documentation of Child Care Enrollment (Full Time Member): | | |
| Tax documents: | | |
| *Loan Forbearance Request form* (if applicable): | | |
| Documentation of attempts to contact member in case of early separation/termination | | |

| Are the following items in the Member's file? | YES | NO |
|---|-----|----|
| Publicity release form: | | |
| Member discipline documentation: | | |
| Mid-term performance evaluation that shows hours completed to date and member signature: | | |
| End of term performance evaluation that shows hours completed to date and member signature: | | |
| *Member End of Term/Exit Form (if member has exited)*: | | |
| Documentation of Compelling Personal Circumstances (if applicable): | | |
| Change of Status/Term Form (if applicable): | | |

** Items surrounded by an asterisk are entered electronically in My AmeriCorps by the member. You should still keep paper copies of these items as a primary source.

This checklist is based on the 08-09 AmeriCorps Provisions. Please be aware when you are looking at files from other program years that there are differences in the provisions from year to year.