



2016-2017 OSMRE/AmeriCorps Member

To Apply:

Submit the following application and materials to **Robert E. Hughes**, EPCAMR Executive Director and Supervisor at rhughes@epcamr.org , no later than **8-1-2016**

- Application Form
- List of 3 professional references
- Cover letter
- Non-fiction writing sample no more than 3 pages
- Resume

Personal Information

First Name: _____ Last Name: _____

Date of Birth (MM/DD/YY): _____ Citizenship Status: _____

Current Address: _____

Permanent Address: _____

Undergraduate Institution: _____ GPA: _____

Major: _____ Graduation Date (MM/YY): _____

Contact Information

Primary Phone Number: _____

Primary Email: _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email: _____

Short Essay Questions

Please respond to all questions in Times New Roman, 12-point font and 1.5 line spacing. Please keep your response limited to 1 page per question.

1. Why are you interested in a year-long position with the OSMRE?
2. What about the OSMRE/AmeriCorps Team interests you? What skills do you have that will help you in this position?
3. How will this program help you achieve your personal and professional goals?