

The Governor's Office of Faith-Based and Community Initiatives



MODULE F
Program Development and Training
Review



Date:

Visit Number: 1 2 3 4 5 6

Agency (Legal Applicant):

Program Name:

Physical Address:

Mailing Address (if different):

Phone:

Fax:

E-Mail:

GFBCI Commission Staff Completing Site Visit:

Program Staff Present:

Name:

Title:

Name:

Title:

Name:

Title:

Name:

Title:

Name:

Title:

NOTES:

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I. Member Recruitment and Selection

Local recruitment plan ensures diversity. *Describe*

Evidence of fair, open, and nondiscriminatory selection process based on either (1) random review of member files or (2) review of all applications submitted.

Indicate which method used and results:

Recruitment materials clearly state minimum qualifications. Yes___ No___

Members enrolled by enrollment cutoff (**30 days after the program starts**).

If enrollment date was extended was permission obtained from the GFBCI.

Yes___ No___

Recruitment materials clearly state that program will provide reasonable accommodation to known mental/physical disabilities.

Yes___ No___

II. Member Orientation and Training

Member orientation plan and agenda designed to enhance member security and community sensitivity, including:

Member rights and responsibilities: Yes___ No___

Member contract: Yes___ No___

AmeriCorps prohibited activities: Yes___ No___

Service specific training: Yes___ No___

Suspension/termination from services: Yes___ No___

Sexual harassment and other nondiscrimination issues: Yes___ No___

Grievance procedures: Yes___ No___

Code of conduct: Yes___ No___

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Requirement under the Drug-Free Workplace Act: Yes___ No___

History of AmeriCorps and National Service: Yes___ No___

Plan for orienting members enrolled after initial orientation: Yes___ No___
Describe:

Plan for in-service or ongoing training with agendas: Yes___ No___
Describe/Attach:

Plan to ensure members are adequately trained and prepared to serve the community:
Yes ___ No ___

Plan to provide pre-service and on-going training that ensures members are skilled to perform at their service site: Yes ___ No ___

Evidence of use of structured activities for members to reflect on service: Yes___ No___

Plan for supporting members in attaining GED: Yes___ No___
Describe:

Plan for supporting members in making the transition after end of service. Yes___ No___
Describe:

Plan for encouraging members to vote: Yes___ No___
Describe:

Plan for involving members in selection of training topics. Yes___ No___
Describe:

Ensures that members training hours do not exceed 20% of total hours served for service year: Yes ___ No ___

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III. Member Supervision

Communicates policy and ensures that members do not engage in prohibited activities:

Yes___ No___ *Describe:*

Provides on-site supervision of all members *OR* ensures that members receive adequate supervision. Yes___ No___

Describe:

Trains and adequately prepares site supervisors: Yes___ No___

Describe:

Plan to ensure that site supervisors absent from initial training are adequately prepared.

Yes___ No___ *Describe:*

IV. Program/Site Partnerships

Orientation for Site Partners: Yes___ No___

Describe and attach the Orientation agenda and the most recent training agenda(s):

Written Site Partner Agreements: Yes___ No___

Attach:

How does site partner provide feedback to the program? *Describe:*

V. Other Training

Is program participating annually in Certified Emergency Response Team Training?

List Date(s) of Training and Members/Staff Trained:

Is the program providing citizenship training for members? Yes ___ No ___

Does program have specific training needs or concerns related to training not being adequately addressed?

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VI. AmeriCorps Identity and Commission Affiliation

Use of AmeriCorps name and logo on: Yes ___ No ___

- Service gear
- Banners
- Member curriculum
- Press releases
- Stationery
- Recruitment brochures
- Signs
- Publications created by members
- Application forms
- Orientation

Use of phrase "The AmeriCorps National Service Network" or "an AmeriCorps Program" and use of slogan "Getting Things Done" on above materials.

Yes ___ No ___

Acknowledgement of support/disclaimer from the Corporation for National Service on any external report or publication of material based upon work supported by grant:

Yes ___ No ___

Notes/Recommendations: