VHCB AmeriCorps
Member Handbook

Forms and Paperwork

Section 4
Paperwork and Forms Overview

Paperwork, paperwork, paperwork! Please be aware that serving in AmeriCorps isn’t all fun and games – there’s also a lot of paperwork. Our program makes an effort to minimize the amount of time members spend on forms and paperwork by consolidating forms and keeping organized records. Please understand that VHCB AmeriCorps staff is not in this field because we love paperwork. We ask for your diligence in submitting timely, complete, and thorough paperwork as required so that we may all keep our focus on service.

All paperwork and required forms, except for those submitted electronically, can be downloaded from our website at www.vhcb.org/americorps

Below is a summary of the paperwork you’ll be required to submit for the program year:

**Enrollment**
- Application through MyAmeriCorps
- 2 written letters of recommendation
- Intent To Commit Form
- Member Agreement/Contract with original signature
- Signed Position Description
- Enrollment Form (through MyAmeriCorps)
- W-4
- I-9 with original signature
- Picture Driver’s License
- Direct Deposit Sheet
  - Includes voided check or proof of account
- VHCB AmeriCorps Program Enrollment Form
  - Must have high school info and original signature
  - Copy of License
  - Proof of vehicle insurance and registration
- Health Care Roster or Waiver with original signature
- Childcare Roster or Waiver with original signature
- Member Goals and Self-Assessment
- On-site Orientation Checklist
- Loan Forbearance request (in My AmeriCorps)

**Criminal Background Check**
- FBI Criminal History Check
- State Criminal History Check
- Sex Offender Registry check
- Abuse Registry check release form
- Child Abuse Registry check
- Adult Abuse Registry check
VHCB AmeriCorps

Mid-Year (Full-Time and Half-Time Members Only)
- Mid-Term Member Performance Review signed by both ACM & supervisor
- Quarterly Activities Reports Qtrs.: 1, 2, 3, 4
- Quarterly Volunteer Logs Qtrs.: 1, 2, 3, 4

Closing
- Exit Form (in MyAmeriCorps)
- Member Agreement Amendment (if last day served is not last day as listed in contract)
- Final Member Performance Review signed by both ACM & supervisor
- End of Term Survey
- Supervisor Evaluation
- Portfolio (Not applicable if re-upping for second term)
- Interest Accrual Request (in MyAmeriCorps)

Other/As Needed
- All Weekly timesheets submitted and approved
- Incident Report Form
- In-Kind Donation Documentation
- Mileage and Expense Claim
- ISP Log & Reflection
- Book Reviews
- R.A.R.E. Opportunity forms
- Evaluations
To document your service hours, you must submit a completed VHCB AC Timesheet every other week. Your service hour weeks will start on Monday and the “Week Ending” date is Sunday. The timesheet should be submitted on the final day of service in a two week period (normally on Friday unless the member serves on the weekend) to your site supervisor for approval.

***If you do not fill out and submit your Timesheet on a bi-weekly basis with the required information and/or fall behind on your hours, you put the continued funding for the VHCB AC in jeopardy. The timesheet is the primary source of documentation for VHCB AC to determine whether or not the member has been actively serving and what activities the member has been performing. If you fail to submit timesheets within a week of its due date, it will be assumed that you are not actively serving and you will be placed in suspension until the approved timesheets have been submitted to VHCB AC in full.

Daily Description of Activities

Each day must contain specific information covering the following:

- A brief description of the allowable activity(ies) occurred
- The number of hours served per day. Please only record hours to the nearest quarter hour.
- Up until the program has received your criminal history results: Accompaniment if serving vulnerable populations.
- Any other information that would verify these service hours

Travel time up to 3 hours each way (to and from) statewide and other trainings may be counted as training hours. Regular commuting time to and from the service site may not be counted. Driving time from your Host Site to another work site may be counted. Lunch should not be counted if a lunch break is taken. If you serve through lunch, these hours may be counted.

Full –time members should be scheduled to serve approximately 40 hours per week, and averaging at least 36 hours/week to successfully complete your term of service by the last day. Holiday, sick or personal time you choose to take is not counted on timesheets – only actual hours served are logged. If you are over or under that average by more than 20 hours, the Program Director will work with you to modify your schedule to get back on track. You will not receive your education award unless your hours are complete (see exceptions in Member Agreement). A member may not take longer than 12 months to complete his/her hours under any circumstances.
Filling Out the Electronic Timesheet on OnCorps:

You can view a tutorial at https://secure.oncorpsreports.com/media/MemberTimesheetTutorial.html

1. Go to http://vt.oncorpsreports.com/. (It would be a good idea to bookmark this page)
2. Select the appropriate program year: **2019-2020**
3. Select “AmeriCorps Member” under VHCB AmeriCorps
4. Enter your username and password and log in
5. Scroll over “Time Tracking” in the blue bar, then click on “Enter Timesheets”
6. Select the appropriate time period and click “choose”
7. If you are assigned more than one supervisor, select a supervisor from the drop-down menu at the top of the timesheet
8. Fill out the timesheet:
   a. Enter the number of direct service, training and/or fundraising hours served for each day under the corresponding heading. Hours can only be entered in quarter hour increments (numbers ending in .00, .25, .50, and .75)
   b. For each day that you claim hours, fill in a description of your activities/service
   c. To save your hours so you can come back and edit the timesheet later, click the Save button. When you have entered all of you hours into the timesheet, click the Authorize and Submit button to send the timesheet to your supervisor for approval. After you click the Authorize and Submit button, a pop-up window will appear asking you to confirm that you want to submit your timesheet. In the pop-up window, click OK to send the timesheet to your supervisors or click Cancel to abort and return to editing your timesheet.
9. Once you submit the timesheet, an e-mail is sent to all of the supervisors selected by the member that they have a timesheet ready for approval.

Members are the only ones allowed to enter hours in OnCorps. Once submitted, the timesheet is locked and members can no longer revise it.

The supervisor logs in to OnCorps Reports and reviews the member’s timesheet. The supervisor can either approve the timesheet in which case it is sent on to Erin/Francis; or send the timesheet back to the member for revision. Erin/Francis will then review the timesheet and accept it, or send it back to the member with the reason for the need for revision.

**Things to Remember:**

- Enter hours in increments of quarter hours (.00, .25, .50, and .75)
- Don’t forget to include an activity description.
- The time sheet should be submitted no later than the last day of service in the period.
- Contact Ashley or Francis with any questions or concerns.
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Supervisor Approval Signature: ____________________________

AmeriCorps Member Service Report

Date: 05/13/2019 7:30 PM
Service Site: Vermont Land Trust
Period: 04/13/2019 - 05/13/2019

Site Supervisor 1: Chile Church
Approved: 05/13/2019 9:00 AM

Site Supervisor 2:
Approved: 05/13/2019

Site Supervisor 3:
Approved: 05/13/2019

Site Supervisor 4:
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<td>Description: Responded to SEP emails and phone calls, recorded, scanned, and filed SEP homeowners insurance binders, hosted a home showing.</td>
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<td>Description: Responded to SEP emails and phone calls, attended HCC meeting and lunch, presented the financial wellness event, participated in CAMP kindergarten planning, updated homeowners resource list.</td>
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<td>Description: Responded to SEP emails and phone calls, prepared the text for financial wellness event, hosted an SEP informational meeting, attended a financial wellness event, attended SEP informational meeting, attended CAMP planning meeting, attended CAMP informational meeting planning meeting, organized application, opened SEP applicants, purchased three for CAMP informational event.</td>
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<td>Description: Purchased and organized items for CAMP informational event, set up for the event, attended the event, led two discussion groups, cleaned up after the event.</td>
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**Comments/Description:**
- SEP = shared equity program
- HCC = Home Ownership Center
- CAMP = Conversations about Money Program
Timesheet Activity Descriptions

Activity Description Do’s:

1. Add a description for each day you claim AmeriCorps Hours.
2. Be brief, concise, and clear in your activity descriptions.
3. Describe activities in a manner that someone that doesn’t understand anything about your position will be able to know what you did.
4. Avoid any descriptors that may appear as a prohibited or otherwise unallowable activity
   a. Example: if you collected and sorted donated goods for clients at a shelter, list as “collected and processed donated clothing items for shelter guests”. If you write “accepted donations” it may appear to someone that you’ve were soliciting monetary donations for the shelter.
   b. Example: “checked email” or “updated facebook” is not clear that it was service related tasks vs your own email/facebook. A better descriptor would be “reviewed and responded to service email” or “added program photos to host site social media”
   c. “Organized desk and service space” is okay, “cleaned office” is not clearly service related.
5. ISP: Define the activity and that it is ISP related. i.e. “Mentored student through Rainbow Readers for ISP”
6. Define ALL acronyms – either in an initial description or in the comments box

Activity Description Don’ts:

1. Do NOT use these words/phrases: Work, Marketing, Administrative, front desk, advocated, solicited, fundraiser, names of private businesses, names of individuals served.
2. Do not use vague descriptors that allow room for uncertainty regarding unallowable activities. Examples of poor descriptions:
   a. “Staffing shelter”
   b. “administrative tasks”
   c. “serving in office”
3. Use generic wording around fundraising – all fundraising or donation gathering should be clearly defined by activity and purpose.
4. Do not enter personal information, confidential information, or irrelevant information in the timesheet.
5. Do not add insignificant activity into timesheet – i.e. “dropped off check on way to field site”; “15 minute break to take a personal call”; “sat at front desk”.

Mileage and Expense Reimbursement

To request Mileage reimbursement from VHCB AmeriCorps, please use the form on the following page.

VHCB AmeriCorps staff will bring this form to trainings and events, or it can be downloaded from the member forms and paperwork page of the VHCB AmeriCorps website at www.vhcb.org/americorps/

VHCB AmeriCorps Member Mileage and expense reimbursement requests should be made as soon as possible. Mileage and Expense Forms will be provided at AmeriCorps trainings and events and should be submitted on the day of when possible. All mileage and expense claims must be completed and submitted to the AmeriCorps office within 30 days of the travel or date of expense. Mileage submitted later than 30 days will not be reimbursed. The timesheet may be submitted in person at events, mailed, scanned & emailed, or faxed in.

VHCB AmeriCorps reimburses members at the current IRS mileage reimbursement rate. At the time of this writing the rate is $.585 per mile.

What can be claimed as mileage?

This form can be used to claim any mileage accrued for VHCB AmeriCorps sponsored trainings and events. This includes all required trainings and events, up to two peer site visits, and any other travel that VHCB AmeriCorps requests of the member.

Any travel required of the member by the host organization will be reimbursed by the host site and should be directly submitted to the member’s supervisor or appropriate person at the organization to handle reimbursements. Examples of travel that should be reimbursed by the host site when using your personal vehicle include: transporting clients, traveling to a field site, making a delivery for the host site, picking up supplies or gear for service related purposes, attending trainings or events required or sponsored by the host site. Please check with your supervisor for the mileage reimbursement policy and how-to at your site.

Please note that the host organization must reimburse members at the current IRS rate. This may be different than the organization’s policy for reimbursing other staff.

Carpooling

As stewards of the environment, VHCB AmeriCorps strongly encourages carpooling whenever possible. If you would like assistance in setting up carpooling to AmeriCorps events, please contact the AmeriCorps Leader or utilize the VHCB AmeriCorps listserv (vhcb-americorps@googlegroups.com) to coordinate with fellow members!
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Current Mileage Rate: $0.55 as of January 1, 2017

Check here if this is an email address change:

Email Address: 

Member Name: 

VHCB AmeriCorps Member Mileage and Expense Claim
Member Portfolios

The end-of-term portfolio documents your term of service (think of it as your Legacy Manual). It is intended to be used as:

- A tool for reflection of your term of service;
- A resource for next year’s member;
- A resource for VHCB AmeriCorps (we read through portfolios to learn more about your experience and pull photos and quotes for marketing purposes);
- A resource for you to show potential future employers your accomplishments and important service work

What should the portfolio include?

You should make two copies: One for your site and incoming member - you will turn this copy in with your exit paperwork and, once we have reviewed them, we will give them to the new member/site; and one for you to keep for yourself.

It must include information that will be useful for the next year’s member to help them more quickly integrate themselves into the organization and community and get to know the available resources and major events. Information should include:

- Community Contacts: local agencies/service providers, businesses, media, parents, police, etc.
- Volunteer and Donor Contacts
- Yearly Calendar of Events/Programming: dates and description of annual events, fundraisers, programming, outreach/tabling venues, etc. and the role the member may have in that event
- Copy of a completed Activity Report: to be used as an example for the incoming member to see how you documented your activities for us
- Photos: digital, if you got ‘em!
- Other: information that will be helpful (info you wish you knew when you first started)

Optional information to include:

- Copies of flyers, brochures, resource booklets, newsletters, databases, reports and other materials you may have produced
- Personal Reflection: In the form of written narrative, prose, song, etc.
  - What have you accomplished and/or learned?
  - How do you believe this experience will help you in the future?
  - What have you given of yourself to others?
  - What have others given of themselves to you?
  - Describe a particularly difficult situation. How did you deal with it? Were you a leader? How would you approach it differently if it were to happen again?
  - How has being in AmeriCorps impacted/changed you?
Other Required Paperwork

All forms can be viewed/downloaded at: https://vhcb.org/our-programs/vhcb-americorps/for-current-members/forms-paperwork

Incident Report Form

Please fill out this form in the case of any on-site incident, physical or other. This form should be completed and returned to VHCB AmeriCorps within 36 hours of the incident.

On-site Orientation Form

To assure that you have been properly oriented at your host site, we ask that you complete this form with your supervisor and send it in the VHCB AmeriCorps within one week of your orientation.

Mid-Term/End-of-Year Performance Review

You will need to submit a Performance Review of your service twice over the course of your service term – once mid-term, and one at the end of the year. This review is completed by both you and supervisor. This is a tool to reflect on your service with your supervisor, but should not be used in place of weekly check-ins. There should be no surprises when filling out this form. See Following pages.

Review of Site Supervisor

This form is only required once upon completion of your term, but it may be submitted to VHCB AmeriCorps at other points in the year. We provide it over the course of the year as a tool in sorting through any issues that may arise your site.

Book Reviews

There is no form for completing book review. Book reviews should be submitted electronically to the AmeriCorps Leader as a one to two page typed thoughtful response to the book. Your review should include: What you learned from the book, why you would/would not recommend it to other members, and how you found it relevant to your service. AmeriCorps staff will review the report. Only once you’ve received approval from AmeriCorps staff may you claim hours for book review.

Independent Service Project

This form should be submitted by the end of your service year. You must document and have validated the hours you served for the project and submit a one to two page reflection on the project.
Vermont Housing & Conservation Board AmeriCorps
Final Member Performance Review

DUE July 30th, 2019.

Instructions

1. Member completes self-review and gives completed review to supervisor July 16.
2. Supervisor responds and adds to member review, and rates the performance in each category.
3. Both supervisor and member meet to discuss review.
4. Completed and signed evaluation is returned to VHCB AmeriCorps Staff by July 30th.

Member Name: ___________________________________________

Member Signature: ___________________________ Date: ________________

Supervisor Name: ____________________________________________

Supervisor Signature: ___________________________ Date: ________________

______________________________________________________________________________
1. QUALITY AND QUANTITY OF SERVICE: accuracy, timeliness, organization, attention to detail and results, productivity, pace, willingness to take on additional responsibility, time management, etc.

Member:

Supervisor: ___ unacceptable   ___ needs improvement   ___ good    ___ very good/notable  
___ exceptional  Comments:

2. TECHNICAL UNDERSTANDING and PROBLEM SOLVING: project knowledge and understanding, technical skills, understanding of organization mission and procedures, ability to follow instructions, contributes ideas for improvement and exhibit innovation, etc.)

Member:

Supervisor: ___ unacceptable   ___ needs improvement   ___ good    ___ very good/notable  
___ exceptional  Comments:

3. DEPENDABILITY & MOTIVATION: attendance, punctuality, reliability, communication, cooperation, positivity, teamwork, self-motivation, attitude, etc.

Member:

Supervisor: ___ unacceptable   ___ needs improvement   ___ good    ___ very good/notable  
___ exceptional  Comments:
4. PROFESSIONAL GROWTH AND DEVELOPMENT: describe the skills learned/expanded in this position, training received, and motivation to take advantage of professional growth opportunities.

Member:

Supervisor:

5. AMERICORPS PROGRAM COMMITMENTS: training and events attendance, use of program initiatives (book club, peer site visits, ISP), collaborative efforts with other members, meeting program requirements (reporting and paperwork), and other ways the member has engaged or enhanced the program.

Member:

Supervisor:

6. FACTORS SUPPORTING OR CHALLENGING EFFECTIVE WORK Identify factors that have helped or prohibited the member being effective in their role

Member:

Supervisor:

______________________________________________________________________________

SUPERVISOR ONLY

1. HOURS FULFILLMENT AND PERFORMANCE

- Overall, Member has performed satisfactorily: _____Yes _____No
- Is the member on track to complete service hours them by their end date? _____yes _____no

Please share a highlight or favorite memory from your member’s service:
Book Review Form

Member Name: _____________________________________________________________

You may read books from the VHCB AMERICORPS Book List without written approval. For the most up to date list of these books, please refer to our site. Otherwise, please contact Ashley Swasey for approval with a brief explanation of why you are choosing that book.

Title: _____________________________________________________________

Author: ______________________________________________________________

Your review should consist of a three paragraph summary addressing the following:

1) Brief synopsis of the book
2) How it relates to your service
3) Your opinion/recommendation of the book

FT members are limited to 6 book reviews and PT members are limited to 3 book reviews. You are limited to no more than one book review per month. Up to 10 training hours can be claimed on your time sheet after approval from VHCB AmeriCorps staff. Please list your hours below:

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Review:

[Review field]

[Approved/Not Approved field]

[Signature field]
ISSUE / INCIDENT REPORT FORM

*** VHCB AmeriCorps should be contacted within 36 hours of the incident. ***

**Member Information:**

Full Name: ___________________________ SS#: ______________________ DOB: __________

Current Address: __________________________________________________________________

Phone Number: _______________________ Host Site Phone Number: ____________________

Position Title: _______________________ Sponsoring Organization: ____________________

Supervisor: __________________________

Member Slot Type: _______________ Member Start Date: ________________

Average hours serve per day/Average hours served per week: _________________________

**Information about the Incident:**

When & where did the incident happen?

Date/Time: __________________________

Location: _____________________________

Witnesses: ___________________________

Describe the incident that occurred. Include what directly caused injury and the events leading up to the accident:

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________

_____________________________________________________________________________
Was the activity that the member was doing at the time of this incident part of their position description? Yes: _____  No: _____

If relevant, was the member trained to operate the equipment being used at the time of the incident? Yes: _____  No: _____

Please explain the type of training received (e.g. 8-hour Safety Course) and any certifications received: ________________________________

What action was taken?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Describe the injury and the part of the body injured:

______________________________________________________________________________

Was first-aid administered? ________________________________

Was medical action taken? If so, explain and list any medications administered, and/or costs incurred:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Name of Hospital where Member received treatment: ________________________________
Name of Physician: ________________________________

Will follow-up medical attention/therapy be required? If so, what?
______________________________________________________________________________
______________________________________________________________________________
Did the injury disrupt Member’s ability to continue serving at Host site?
Yes: _____  No: _____

How many days of service has the member missed as a result of injury?

Has the member returned back serving at Host Site?
Yes: _____  No: _____
If yes, please provide date: ________________

I attest that the information provided in this report is true to the best of my knowledge.

_______________________________________  __________________________
Signature                                   Date
Independent Service Project

Member: _______________________________

**Description and Reflection of Independent Service:**
Please attach a one to two page reflection on your service project that includes the following:
- Description of the service project – what the project was, organizations you served with, anyone you collaborated with.
- Results and impact of project
- What did you learn or gain from the project?

**Log of Independent Service Hours:**

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<th>Description of Activity</th>
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**Total Hours Served:** ______________

Member Signature                Date

Authorizing Official Name        Position/Title

Authorizing Official Signature  Date

*A total minimum of 15 and maximum of 30 hours should be committed to the Independent Service Project.