



National Health Corps (NHC) 2023-2024 Host Site Application

| Organization Information | | | |
|---|--|--|--|
| Organization Name | | | |
| Mailing Address | | | |
| City and State | | Zip | |
| Phone | | Fax | |
| Host Site Supervisor Information | | | |
| Name | | | |
| Position | | | |
| Phone | | email | |
| If the Host Site is selected, will this person be NHC's contact throughout the member interview and matching process? | | Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| If no, please provide contact information: | | | |
| Contact Name | | | |
| Contact Position | | | |
| Contact Phone | | | |
| Contact email | | | |
| Organization Description | | | |
| Type of organization | <input type="checkbox"/> Nonprofit <input type="checkbox"/> Government <input type="checkbox"/> Other/describe: | | |
| Scope of organization | <input type="checkbox"/> National <input type="checkbox"/> State <input type="checkbox"/> Regional <input type="checkbox"/> Citywide <input type="checkbox"/> Neighborhood | | |
| How did you hear about the NHC? <input type="checkbox"/> NHC staff <input type="checkbox"/> Email <input type="checkbox"/> Host Site <input type="checkbox"/> Advertisement | | | |
| <input type="checkbox"/> Current/former member <input type="checkbox"/> Other _____ | | | |
| Has your organization hosted an NHC member in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

Has your organization hosted an NHC member during the 2021-2022 program year? Yes No

of members requested

Organization Infrastructure and Capacity

Please check all of the following that your organization will provide to the NHC member to help them fulfill their service activities.

- desk computer phone internet access printer access photocopier access e-mail account
 member's own working space or office access to a remote server, EHR, record-keeping system, etc. (if applicable to service position) all-gender restrooms accessibility for individuals with mobility-related needs

For all of the above-checked items, please describe when each will be provided to the member(s) assigned to the Host Site:

Please identify any equipment/technology/space required to fulfill the member service position that the Host Site anticipates being unable to provide:

What is your organization's overall operating budget?

- Up to \$250,000
 \$250,000 to \$500,000
 \$500,000 to \$1 million
 \$1 million to \$5 million
 Over \$5 million

The Host Site contribution per member for the 2023-2024 service year is anticipated to be [operating site insert range].

Please indicate if funding is secured or pending.

- Secured Pending If pending, indicate anticipated date of the award: _____

What are the dates of your organization's fiscal year? _____

Narrative

Briefly describe how your organization has determined that there is a need for an NHC member.

In the event of ongoing concerns or restrictions related to COVID-19, can some/all of the proposed member activities be completed remotely (via teleservice)? If so, please describe what adaptations the Host Site would be able to make to help ensure continuity in service activities. If not, briefly describe policies and practices that would help protect the member from COVID-19 transmission risk while serving on-site.

Please briefly explain why the person designated as the Host Site Supervisor/Mentor on this application is the best fit to be the NHC Supervisor/Mentor for your Host Site.

Please briefly describe how the organization and the Host Site Supervisor/Mentor designated on this application will support the supervision and professional development needs of the member.

NHC aims to provide opportunities for individuals with diverse backgrounds and experiences. As such, the program does not exclude potential members based on criminal history (excluding any murder conviction or conviction that would necessitate registration on a sex offender registry, per AmeriCorps regulations). **If applicable, please explain any organizational policies that would restrict the Host Site from hosting an NHC member with a criminal history.**

_____ Please attach your organization's non-discrimination and any related policies and check here when you've done so.

_____ Please attach a completed proposed Member Position Description for every requested NHC member position and check here when you've done so.

Host Site Agreement

Acknowledgements:

We understand that AmeriCorps members are required to attend a program pre-service orientation, member meetings/trainings, bi-monthly all-corps committee meetings, and the Dr. Martin Luther King Jr. Day of National Service, and may participate in group service projects. NHC member attendance at these events is required, and may take place during regularly-scheduled Host Site service hours.

An agency authorized representative (see signature section below) is the person in your organization authorized to accept and commit funds on behalf of the organization.

Certifications: Drug-Free Workplace and Non-discrimination Policies:

The legal applicant organization has an active Drug-Free Workplace Policy and an active Non-Discrimination Policy.

Assurances

As the authorized representative of the applicant organization, I certify, to the best of my knowledge and belief, that the organization:

- Has the institutional, managerial, and financial capability - including sufficient funds to pay the Host Site contribution - required to ensure proper planning, management, and completion of the activities described in the application.
- Will designate a Host Site Supervisor who will provide adequate supervision to ensure/maintain NHC members' accountability, member development, program development, and completion of program service objectives. Activities include, but are not limited to:

- Attending required annual orientation and Host Site supervisor/mentor meetings;
- Meeting weekly with each NHC member assigned to the site throughout their entire service term;
- Completing program paperwork including bi-weekly timesheet review, member performance reviews, and corrective action reports as necessary;
- Providing/coordinating training for NHC members related to Host Site responsibilities;
- Maintaining regular communication with NHC Program Staff.

Please see the NHC Host Site Request for Proposals 2023-2024 for additional NHC Host Site Supervisor requirements.

- Participate in the recruitment and member matching process by scheduling and conducting member interviews in accordance with NHC's member recruitment timeline requirements.
- Provide each NHC member with a position description (template provided by NHC) that clearly defines their duties and responsibilities, including day-to-day activities. The position description should align with NHC's mission and meet all requirements outlined in the Request for Proposals associated with this application.
- Reimburse NHC members for site-related travel expenses such as travel to outreach events, between service sites, or other authorized travel approved by the Host Site Supervisor, but not daily travel to and from the Host Site.
- Provide in-kind contributions to NHC members that include, but may not be limited to: supervision, office space, necessary supplies, materials, administrative support, and equipment, including access to a phone, a computer, and appropriate office space as applicable.
- Fully share reasonable responsibility with the NHC Operating Site for retention of NHC members.
- Support NHC member attendance and participation in NHC-sponsored member meetings, monthly trainings and group services projects, retreats, site visits and other program functions as determined by NHC program staff.
- Maintain regular communication with NHC program staff regarding each member's performance, special initiatives, achievements, issues, and other matters that affect NHC program effectiveness at the site.
- Adhere to NHC program policies as detailed in the *NHC Member Handbook*.
- Participate with NHC program staff in strategies for problem solving, program evaluation, and program improvement in a timely manner within reasonable deadlines provided by NHC staff.
- Inform and guarantee other Host Site staff understand the role of AmeriCorps and the NHC member, including restricted and prohibited activities as communicated by NHC program staff and outlined in the *NHC Member Handbook*.
- Participate in and assist with data collection and reporting for NHC performance measures and evaluation activities within timely, reasonable deadlines requested by NHC.

- Participate in and assist with the NHC communications/public relations work plan as necessary, including but not limited to: using the AmeriCorps and NHC logos (provided by NHC) on all promotional material discussing the Host Site’s partnership with AmeriCorps and NHC, and including the NHC boilerplate (provided by NHC upon request) in all press releases/promotional material discussing the Host Site’s partnership with NHC.
- Inform NHC staff and provide documentation of any concerns, problems, or issues related to a member’s performance or conduct at the site immediately, and in accordance with the NHC performance improvement/corrective action procedures.
- Inform NHC staff immediately of any developments or delays that have an impact on NHC activities, any significant problems relating to the administrative aspects of the partnership, or any suspected misconduct or nonfeasance related to this partnership.
- Comply with all NHC and AmeriCorps monitoring activities and agree to provide NHC and AmeriCorps authorized representatives access to program documentation, organizational procedures, and other information as may be reasonably required.
- Comply with all NHC required improvement/corrective actions in the time frame stipulated by the NHC as may be reasonably required.
- Confirm that the proposed member position(s) will not violate AmeriCorps member activity restrictions and prohibited activities as outlined in the 2023-2024 NHC Host Site RFP.

| Signatures of Approval | | | |
|---|--|------|--|
| By signing below, you acknowledge that you have read and understand the contents of this document. In addition, you are affirming that you have given consideration to the goals and guidelines of the NHC, and have developed this application package to align with those program goals and guidelines. | | | |
| Host Site Supervisor Signature | | Date | |
| Host Site Supervisor Name | | | |
| Agency Authorized Representative Signature | | Date | |
| Agency Authorized Representative Name | | | |
| Agency Authorized Representative Position | | | |