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| Position Title: | Food Program/Childcare Assistant | Service Category:  | CORE Susquehanna AmeriCorps |
| Service Site: | Milton YMCA | Date Submitted: | 4/8/2019 |
| Site Address: | 12 Bound Avenue | Travel Required: | No |
| Compensation: | Living Stipend- $14,000.00Education Award- $6,095.00 | Service Term: | August 20, 2019 to August 7, 2020 |
| Host Site Supervisor: | Maddie Masevicius | Email: | mmasevicius@gsvymca.org |
| Phone: | 570-742-7321 | Posting URL: | www.coresusquehanna.org |
| Applications Accepted By: | **Person and phone to contact for interview if different from supervisor:**  |
| Email Dennis Huratiak, CORE Susquehanna AmeriCorps Program Directordhuratiak@union-snydercaa.org | Jody ReussDirector of Childcare570-742-7321 |
| Member Position Summary*In addition to the member position summary and duties, ALL AmeriCorps members are required to participate in CORE AmeriCorps Group Activities. AmeriCorps members may not participate in any activities included in the Prohibited Activities as listed in the ‘Partner Site and Member Agreements’.* |
| Serve children ages 6 weeks to 13 years in the Early Learning and/or School Age and assist with delivery of Food program to outside sites. Programs provide routine care/activities, monitor/record observations, design and carry out lesson plans that ensure healthy development and growth for the children. |
| **Duties** |
| Serve children to ensure safety and keep engaged in beneficial activities. Participation in CORE AmeriCorps group activities. Member may not participate in any activities included in the Prohibited Activities as listed in the partner site and member agreement.  |
| Minimum Qualifications |
| * Must have high school diploma
* Must be 18 years or older
* Physical and TB test must be completed before serving children
* Members must have all clearances before serving
* Mandated reporter training, CPR and First Aid must be completed within 90 days
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| **Proposed Weekly Schedule** |
| * 37-40 Hours
* Monday-Friday with occasional evenings and weekends for trainings
 |
| ***Will the member be serving vulnerable populations (children, youth, elderly, disabled)?***[x]  Yes [ ]  No |
| ***Will the contact with vulnerable populations be episodic or reoccurring?***[ ]  Episodic [x]  Reoccurring |
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| *I understand the expectations and requirements of this position. I understand that this position description is an addendum to the AmeriCorps Member Agreement.* |
| Member Name: |  |
| Signature of Member Accepting Position: |  | Date: |  |
| Signature of Site Supervisor: |  | Date: |  |