

## **Serve Idaho AmeriCorps Slot Conversion Policy and Procedure**

As outlined in the Program Directors Manual, Serve Idaho may approve occasional changes of currently enrolled members to lesser-term slots as well as conversions of unfilled slots. Programs requesting a slot conversion must complete the Slot Conversion Form and submit it to the Grants Officer at Serve Idaho. Serve Idaho and the program must take into account the impact on the program quality. The Corporation for National and Community Service (CNCS) will not cover health care or childcare costs for less than full-time members.

Programs may not request a transfer of currently enrolled members to a lesser-term status simply to provide a pro-rated education award if the member would otherwise be released for cause. It is also not allowed to request to convert a slot to a lesser-term slot at the end of a member's term of service in order to award a pro-rated education award when the member has not completed the hours required by their original term.

Changing less than full-time members to a greater slot type is discouraged because it is very difficult to manage, unless done very early in the member's term of service. Serve Idaho may approve such changes only in extenuating circumstances as long as the program's current budget can accommodate such changes. The program must request the slot conversion by completing the Slot Conversion Form. Keep in mind that a member's minimum 1700 hours must be completed within 12 months of the member's original start date.

Slot conversions are not allowed for fixed amount grants.

Slot conversion request forms will be processed within five business days of their receipt.

# Slot Conversion

## Serve Idaho

Project Title/ Description	Grant Agreement #				
Sub-Grantee Name	Date of Requested Slot Conversion	Program Year			
<p>1. Slot Changes:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><b>Total Original Slots:</b></p> <p>FT with Living Allowance (1700 hrs) _____</p> <p>HT with Living Allowance (900 hrs) _____</p> <p>HT without Living Allowance (900 hrs) _____</p> <p>RHT with Living Allowance (675 hrs) _____</p> <p>RHT without Living Allowance (675 hrs) _____</p> <p>QT with Living Allowance (450 hrs) _____</p> <p>QT without Living Allowance (450 hrs) _____</p> <p>MT with Living Allowance (300 hrs) _____</p> <p>MT without Living Allowance (300 hrs) _____</p> </td> <td style="width: 50%; vertical-align: top;"> <p><b>Total Revised Slots:</b></p> <p>FT with Living Allowance (1700 hrs) _____</p> <p>HT with Living Allowance (900 hrs) _____</p> <p>HT without Living Allowance (900 hrs) _____</p> <p>RHT with Living Allowance (675 hrs) _____</p> <p>RHT without Living Allowance (675 hrs) _____</p> <p>QT with Living Allowance (450 hrs) _____</p> <p>QT without Living Allowance (450 hrs) _____</p> <p>MT with Living Allowance (300 hrs) _____</p> <p>MT without Living Allowance (300 hrs) _____</p> </td> </tr> </table>				<p><b>Total Original Slots:</b></p> <p>FT with Living Allowance (1700 hrs) _____</p> <p>HT with Living Allowance (900 hrs) _____</p> <p>HT without Living Allowance (900 hrs) _____</p> <p>RHT with Living Allowance (675 hrs) _____</p> <p>RHT without Living Allowance (675 hrs) _____</p> <p>QT with Living Allowance (450 hrs) _____</p> <p>QT without Living Allowance (450 hrs) _____</p> <p>MT with Living Allowance (300 hrs) _____</p> <p>MT without Living Allowance (300 hrs) _____</p>	<p><b>Total Revised Slots:</b></p> <p>FT with Living Allowance (1700 hrs) _____</p> <p>HT with Living Allowance (900 hrs) _____</p> <p>HT without Living Allowance (900 hrs) _____</p> <p>RHT with Living Allowance (675 hrs) _____</p> <p>RHT without Living Allowance (675 hrs) _____</p> <p>QT with Living Allowance (450 hrs) _____</p> <p>QT without Living Allowance (450 hrs) _____</p> <p>MT with Living Allowance (300 hrs) _____</p> <p>MT without Living Allowance (300 hrs) _____</p>
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<p>1. Justification for Slot Conversion:</p>          					
2. Program Start and End Date:	3. Current Enrollment Dates:				
<p>4. MSY Change</p> <p style="margin-left: 40px;">Original: _____ Requested: _____</p>					
<p>5. Cost per MSY (*must be at or under original)</p> <p style="margin-left: 40px;">Original: _____ Requested:* _____</p>					
<p>6. Additional Enrollment dates (if needed- only allowed for less-than FT Members)</p> <p style="margin-left: 20px;">From: _____ to _____</p> <p style="margin-left: 200px;">Slots to be enrolled:      HT      RHT      QT      MT</p>					
<b>Grantee</b>	<b>Serve Idaho</b>				
Signature	Approved <input type="checkbox"/> Rejected <input type="checkbox"/>				
Printed Name and Title	Heather Luff, Grants Officer				
Date	Date				