



CT International 4-H Youth Exchange Program Chaperon Application Form

ALL INFORMATION PROVIDED WILL BE CONFIDENTIAL

NAME _____

MAIL ADDRESS _____

HOME ADDRESS (if different) _____

PHONE: HOME _____ WORK _____

DATE OF BIRTH: _____ Social Security #: _____
(must be 21 years of age or older) (Needed for background check reasons)

ADDRESS(ES) FOR PREVIOUS 5 YEARS

NAME(S) PREVIOUSLY USED _____

CURRENT EMPLOYER _____

EMPLOYER ADDRESS _____

1. Please tell us about your skills and interests:

Educational Background

Current Occupation

Hobbies, Interests

Special Skills and Training

Previous Work with Young People

Previous Volunteer Experience

List and briefly explain any international activities you have been involved in:

Language skills: (*other than English including sign language*)-indicate language, reading, writing, speaking, comprehension proficiency, and years studied & if spoken at home:

4-H Experience: _____member Please indicate the State_____, County _____, Country _____
_____leader Please indicate the State _____, County _____, Country _____
_____other volunteer activities What capacity? _____

2. With which age group(s) do you prefer to work?

_____13-14 _____adults
_____15-19 _____mixed ages

3 Briefly explain why you would like to be an IFYE Chaperon.

4. Additional Information (use additional sheets if necessary)

The 4-H Youth Development Program has a responsibility to provide a safe and healthy environment for all youth. Because of this responsibility, we ask for the following information.

Answers to the following questions will be considered if relevant to the volunteer position for which you are applying:

- a. Do you use illegal drugs? yes____ no____
- b. Have you ever been convicted of child abuse or neglect? yes____ no____
- c. Have you ever been convicted of animal abuse? yes____ no____
- d. Have you ever been convicted of a criminal offense? yes____ no____

- e. Have you ever been convicted of a motor vehicle violation? yes____ no____
- f. Have a valid driver's license? yes____ no____
 driver's license # _____
- g. Are there any criminal charges pending against you? yes____ no____
- h. Other than the above, is there any fact or circumstance that would cause questions about having you supervise, guide and care for young people? yes____ no____

Please explain any "yes" answers here. For convictions, please include an explanation of the nature of the conviction, the degree of rehabilitation and the time since release. (You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes § 46b-146, 54-76o, or 54-142a. Criminal records that may be erased are records pertaining to a finding of delinquency or that a child was a member of a family with service needs (C.G.S. § 46b-146), an adjudication as a youthful offender (C.G.S. § 54-76o), a criminal charge that has been dismissed or nolleed, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon (C.G.S. § 54-142a)).

5. References

Please list 3 people who have know you for at least 2 years. They should be familiar with your character as it relates to working with young people. **If you are or have been involved with 4-H, one of the references must be an active 4-H staff person or leader.** Please do not include family members. Each will be asked by phone or by letter to complete a short questionnaire. All responses will be held confidential.

NAME	MAIL ADDRESS	PHONE NUMBER
(1) _____	_____	_____

EMAIL ADDRESS _____		
(2) _____	_____	_____

EMAIL ADDRESS _____		
(3) _____	_____	_____

EMAIL ADDRESS _____		

6. Upon acceptance as a volunteer for the University of Connecticut Cooperative Extension System 4-H Youth Development program, I agree to fulfill the following responsibilities while serving in this role:

- a. Participate in appropriate volunteer training and conduct 4-H activities in compliance with University of Connecticut Cooperative Extension System guidelines.
- b. Maintain the integrity and standards of 4-H youth development.
- c. Keep 4-H staff fully informed of group or project activities, including field trips, fund raising events, and other special activities.
- d. Maintain up-to-date enrollment with the local University of Connecticut Cooperative Extension System 4-H office for myself, my members, and other volunteers I direct.
- e. Welcome all youth, their families and other volunteers to participate in the program, regardless of race, color, national origin, religion, sex, age and disability.
- f. Maintain appropriate records and financial information. Prepare and submit reports as requested.

I hereby certify that there are no misrepresentations or omissions of fact in the foregoing statements and answers to questions. I understand that misrepresentation or omission of fact is cause for non-appointment or dismissal as a volunteer.

I authorize the University of Connecticut Cooperative Extension System, 4-H Youth Development Program, to contact listed references and to conduct a background investigation which may include, but not be limited to, employment, child welfare, motor vehicle and/or criminal offense histories and animal cruelty. I release from liability the University of Connecticut, its Cooperative Extension System, 4-H Youth Development Program, the State of Connecticut and their agents and employees in conducting this background investigation and any persons or entities which provide information in response to the background investigation.

Signature

Date

11/3/05