



4-H Volunteer Application Form



UNIVERSITY OF CONNECTICUT
COOPERATIVE EXTENSION SYSTEM

ALL INFORMATION PROVIDED WILL BE CONFIDENTIAL

NAME _____

MAIL ADDRESS _____

HOME ADDRESS (if different) _____

PHONE: HOME _____ WORK _____ CELL _____

EMAIL _____

DATE OF BIRTH: _____ Social Security #: _____
(Needed for background check)

ADDRESS(ES) FOR PREVIOUS 5 YEARS

NAME(S) PREVIOUSLY USED _____

CURRENT EMPLOYER _____

EMPLOYER ADDRESS _____

Because we are required by the federal government and our funding agency(s) to submit data on all participants that we serve, we would appreciate you checking the category below that best describes your sex, race(s) and national origin group.

Sex: Female Male

Racial Categories (Please check all that apply):

American Indian/Alaskan Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White

FOR OFFICE USE ONLY:
County: _____ 4-H Club: _____

Ethnic Categories: (Please check one)

____ Not Hispanic or Latino ____ Hispanic or Latino

Is any member of your immediate family currently serving in the military? ____ Yes ____ No

If yes, please designate branch: ____ Active Army ____ Army Guard ____ Army Reserve
____ Active Air Force ____ Air Guard ____ Air Force Reserve ____ Active Navy ____ Naval Reserve
____ Active Marine Corps. ____ Marine Corps. Reserve ____ Active Coast Guard ____ Coast Guard Reserve
____ Dept. of Defense

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

4-H Experience: ____ member Please indicate the State____, County____, Country____
____ leader Please indicate the State____, County____, Country____
____ other volunteer activities What capacity? _____

2. What type of position(s) do you prefer or would you like to be considered for?

____ Group/Club Organization Leader ____ Advisory Group Member
____ Group/Club Assistant Leader ____ 4-H Camp Board Member
____ Group Project Leader ____ Youth Mentor
____ 4-H Camp Volunteer ____ Other (please be specific)
____ 4-H Special Project Teacher

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

____ 7-9 ____ 13-14 ____ adults
____ 10-12 ____ 15-19 ____ mixed ages

4. If you want to teach a 4-H project, which area (s) do you prefer?

_____ Citizenship & Civic Education
_____ Consumer & Family Sciences
_____ Healthy Lifestyles Education
_____ Plants
_____ Animals

_____ Communications & Expressive Arts
_____ Environmental Ed. & Earth Sciences
_____ Personal Development & Leadership
_____ Science & Technology

5. Briefly explain why you would like to be a 4-H volunteer.

6. 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?
driver's license # _____ State _____
- 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 nolle, 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)).

7. References

Please list 3 people who have known you for at least 2 years and are not related to you. They should be familiar with your character as it relates to working with young people. 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 | COMPLETE MAIL ADDRESS | PHONE NUMBER |
|----------------------|-----------------------|--------------|
| (1) _____ | _____ | _____ |
| EMAIL ADDRESS: _____ | _____ | |
| (2) _____ | _____ | _____ |
| EMAIL ADDRESS: _____ | _____ | |
| (3) _____ | _____ | _____ |
| EMAIL ADDRESS: _____ | _____ | |

8. 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