

GENERAL INFORMATION

Last Name	t Name First Name			M.I.	Name You Prefer	
Mailing Address				How long at this address?		
City	State Zip			County		
If less than a year, previous addr	ress			How long county?	have you resided in the	
City	State	Zip		Email Address		
Daytime Phone	Eveni	Evening Phone			Best Time to Call	
Are you a 4-H Alumnus? ☐Yes ☐ No	If yes, where? City State			If yes, what year(s) were you a 4-Her?		
Are you a 4-H Alumnus?	If yes, where?				at year(s) were you a	
Have you ever been a 4-H	If yes, where?					
volunteer? Yes No			Cou	nty	State	
Why are you interested in a 4-H	Volunteer position?					
What time commitments are you	considering? Have	you ever worked v	•		xplain briefly.	
hrs./weekhrs./month						
ΓRANSPORTATIO	N					
Do you have access to a car?	Do you have a valid	Drivers licens	e number and sta	ate	Date of Expiration	
☐ Yes ☐ No	drivers license? ☐ Yes ☐ No	DL#	Si	tate	/	
Have you ever received a traffic violation?	If yes, please explain.	l				
☐ Yes ☐ No						

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Employer/Organization

EMPLOYMENT AND VOLUNTEER EXPERIENCE

Current Occupation/Volunteer Position

(This information is needed for the past 10 years. Please attach extra pages as necessary.)

											ļ
Employer/Organization Address		Emp	Employer/Organization Telephone								
City, State, Zip		Emai	mail Address						Emp	loyed	l From/To
Previous Occupation/Volu	nteer Position	Emp	Employer/Organization								
Employer/Organization Ac	idress	Emp	Employer/Organization Telephone								
City, State, Zip		Ema	Email Address					Emp	loyed	l From/To	
Previous Occupation/Volunteer Position		Emp	Employer/Organization								
Employer/Organization Ad	ldress	Emp	Employer/Organization Telephone								
City, State, Zip		Emai	Email Address Employed From/T					From/To			
EDUCATIONAL		UN	D								
Name of Last High School	Attended			State			County				
Did you graduate?	Did you graduate? Did you receive a GED?			If not, please circle highest grade completed.							
☐ Yes ☐ No	☐ Yes [☐ No	,	1 2 3	4 5	6 7	8 9	10	11	12	GED
Education Beyond	High School (Please	begi	n with curren	t or most	recent.)				
Institution/City/State		Date		s Attended Degree Month/Yea		h/Year	Major				
			From To:	1:							
Institution/City/State				s Attended	Degree	Mont	th/Year	Maj	or		
institution/City/State			From:		Degree Wonth Tear Wa		1v1aj	injoi			

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To:

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REFERENCES

	to you, who have knowledge of your qualific lease provide complete addresses and phone					
Name	Address, City, State, Zip					
Telephone Number	Email Address	Relationship				
Day						
Evening						
Name	Address, City, State, Zip					
Telephone Number	Email Address	Relationship				
Day						
Evening						
Name	Address, City, State, Zip					
Telephone Number	Email Address	Relationship				
Day		-				
Evening						
I authorize contacting the listed references, previous employers, and volunteer organizations. I understand the omission or misrepresentation of information requested may result in non-appointment or dismissal as a 4-H volunteer. If appointed as a volunteer, I agree to abide by the policies of the North Carolina Cooperative Extension and the North Carolina 4-H Program and to fulfill my volunteer responsibilities to the best of my ability. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith. Applicant Signature Date						
	For Office Use Only					
The reference check was: Satisfactor	ory Unsatisfactory					
Date of reference check:	Name of person conducting the check:					

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This information is requested solely for the purpose of determining compliance with Federal civil rights laws; your response will not affect consideration of your application. 4-H policy prohibits unlawful discrimination based on race, sex, color, creed, religion, national origin, age, disability, or political affiliation.

DEMOGRAPHIC DATA

Last Name	First Name		M.I.
Maiden Name	Gender	Date of Birth	
	☐ Male ☐ Female	/	/
Ethnic Group		Month	Day Year
Etimic Group			
☐ Hispanic or Latino Ethnicity &	& OR No	t Hispanic or Lat	ino &
☐ White (only)		White (only)	
☐ Black or African American (only)		Black or African Ameri	can (only)
☐ American Indian or Alaska Native (onl	y)	American Indian or Ala	ska Native (only)
Asian (only)		Asian (only)	
☐ Native Hawaiian or Pacific Island (only	<i>y</i>)	Native Hawaiian or Pac	ific Island (only)
☐ White & Black		White & Black	
☐ White & American Indian or Alaska Na	ative	White & American Indi	an or Alaska Native
☐ Black & American Indian or Alaska Na	ntive \square	Black & American Indi	an or Alaska Native
☐ Black & Asian		Black & Asian	
☐ Balance (other combinations)		Balance (other combina	ations)

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BACKGROUND SCREENING CONSENT

Last Name	First Name		M.I.	*Social Security Number				
Current Address			Since wh	en? Date of Birth				
City	State	Zip	County					
Home Phone	Drivers licenses	number and state	Date of Expiration					
	DL#	State	/					
<u>-</u>	List below previous residence(s) (city, state, zip) and any alias, maiden, or other names for							
the past seven years. (Please begin v	vith the most 1	recent address.)	How lor	ng at this address?				
rievious address			HOW IOI	ig at this address?				
City	State	Zip	Alias, M	laiden, or Other Names				
Prior Address	L	1	How lor	ng at this address?				
City	State	Zip	Alias, Maiden, or Other Names					
Prior Address			How long at this address?					
City	State	Zip	Alias, Maiden, or Other Names					
misdemeanor or felony other than a misdemeanor traffic violation?	Information should nless the sentence		the applicar	nt was sentenced for a crime, will not necessarily prevent an				
	applicant from becoming a 4-H volunteer, but rather will be considered as it relates to specifics of the volunteer position for which you are applying.)							
I hereby authorize the 4-H agent or authorized any information pertaining to my background f give my consent to a criminal and traffic violat	or the sole use of	obtaining a criminal and tr						
I certify that, to the best of my knowledge and	belief, all of my	statements are true, correct,	complete,	and made in good faith.				
Applicant Signature Date								
*Social security numbers are collected for the sole purpose of conducting background clearances. Providing the information is optional, however, for those positions that require criminal background checks, this information is necessary for program participation.								
	For Offic	e Use Only						
The criminal background check was:	☐ Satisfactory	☐ Unsatisfactory						
Date of background check: Name of person conducting the check:								
If unsatisfactory, please explain								

Prepared by: Harriett C. Edwards, Ed.D

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North Carolina 4-H Volunteer Strengths and Preferences

Name:	Date:
Please list within the four sections, items that complete each st your life, such as work or home. Discuss your lists with some information will be helpful as we match your interests to avail	one else and ask what they think should be listed. This
PLEASE, ALLOW ME My talents, skills, and interests are	NO, THANK YOU I would not want to be asked to
ENDEAVORS I would like to learn how to	YOUTH RELATIONSHIPS I would prefer working with youth ages



North Carolina 4-H Volunteer Agreement and Standards of Behavior

Applicant Name	

North Carolina 4-H Volunteer Standards Of Behavior

Families and other youth-serving organizations place trust in North Carolina Cooperative Extension to provide quality leadership and care for participants in 4-H programs. The opportunity to work with youth is a privileged position of trust that should only be held by those who are willing to commit to upholding behavior that fulfills this trust. For these reasons, the following behavior guidelines are provided for volunteers working in the North Carolina Cooperative Extension 4-H program.

- 1. Treat others in a courteous, respectful manner demonstrating behaviors appropriate for a positive role model for youth.
- 2. Obey the laws of the locality, state and nation.
- 3. Make all reasonable efforts to assure that 4-H youth programs are accessible to youth without regard to race, color, national origin, religion, sex, age, disability or political affiliation, and promote a spirit of positive participation.
- 4. Recognize that verbal and/or physical abuse and/or neglect of youth is unacceptable in 4-H youth programs, and report suspected abuse to 4-H officials and the proper authorities.
- 5. Do not participate in or condone neglect or abuse that happens outside the program to 4-H youth participants, and report suspected abuse to the proper authorities.
- 6. Operate motor vehicles (including machines or equipment) in a safe and reliable manner and only with a valid operator's license and the legally required insurance coverage.
- 7. Inform county 4-H staff of any arrests or charges of criminal activity against you. (Temporary suspension pending resolution of the case may be required.)
- 8. Notify Extension staff promptly of any incident that may violate 4-H policies or personal rights.
- 9. Do not require 4-H participants to purchase materials, supplies, equipment, animals or services from any specific vendor.
- 10. Teach 4-H youth to provide appropriate animal care and treat animals humanely.
- 11. Do not consume alcohol or illegal substances while responsible for youth in 4-H activities nor allow 4-H youth participants under supervision to do so.
- 12. Accept supervision and support from county, district, and state 4-H staff while involved in the 4-H program.

North Carolina 4-H Volunteer Agreement

Volunteers are asked to carefully consider the following expectations and confirm a willingness to observe these by signing where indicated. In addition, adults serving as volunteers can expect the following from the North Carolina Cooperative Extension (NCCE).

NCCE AGREES TO:

- Provide orientation training for the position.
- Set educational tone and directions.
- Provide job descriptions.
- Provide assistance, support and encouragement.
- Give recognition for time and energy devoted to the job
- Inform of coming events and activities.
- Make annual evaluations.
- Provide training opportunities and material to develop understanding and management of the volunteer assignments.
- Provide educational materials to be used for project and club organizations.
- Provide timely information on opportunities for youth at county, state, and national levels.

VOLUNTEER AGREES TO:

- Complete New 4-H Leader Orientation & Training.
- Be supportive of Extension programs and staff members.
- Participate in County Leader Association meetings and training as appropriate.
- Inform enrolled youth of Extension program opportunities.
- Supply County Extension Office with application updates annually.
- Abide by the North Carolina 4-H Volunteer Standard of Behavior.
- Participate in available training as appropriate to fulfill my duties.

explained by Extension staff and to abide b as a 4-H volunteer. I understand that volun	y the 4-H Code of Conduct teering with North Carolin or notice. I understand and	ds of Behavior and Volunteer Agreement. I agree to part and any other rules specific to individual events at what a Cooperative Extension is a privilege, not a right. If agree that failure to comply with this agreement is grandlar 4-H program.	hich I may be serving further understand that I
Volunteer Signature	Date	NCCE Representative's Signature	Date

Adapted by: Harriett C. Edwards, Ed.D

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North Carolina 4-H Volunteer Photographic, Video, Audio and Web Consent and Release

North Carolina 4-H, the youth development component of North Carolina Cooperative Extension, often uses photographs, slides, films and other images or recordings of participants for educational, programmatic, public relations and accountability purposes. Such photographs or other illustrative material may be used in newsletters, media presentations, or publications produced by 4-H Youth Development or agencies contracted by 4-H. Neither individual addresses nor telephone numbers will be published within these materials.

This form allows you, as a volunteer, to choose whether you wish to be in films, videos, illustrations or written text used by North Carolina 4-H. Yes, I give permission to North Carolina 4-H Youth Development to make photographs, slides, audio, video other recordings, or written text of me. Further, I authorize their use, for 4-H purposes, without inspecting or approving the finished product or its specific use. I hereby release to North Carolina 4-H all rights to exhibit this work publicly or privately, including posting to the 4-H web site. I waive any rights I may have to receive compensation or additional consideration. No, I do not give permission for the creation or use of photographs, slides, audio, video, other recordings, or written text of me by 4-H or in 4-H media presentations. Volunteer's Name (Please Print): _____ Volunteer's Signature: _______Date: _____ If volunteer is under the age of 18, permission of the parent or guardian is required. Parent/Guardian Signature: _______Date: ______