



ADULT VOLUNTEER APPLICATION FORM

Mission of Tennessee 4-H Youth Development

To provide research-based Extension educational experiences that will stimulate young people to gain knowledge, develop life skills and form positive attitudes to prepare them to become capable, responsible and compassionate adults.

Vision of Volunteer Involvement in Tennessee 4-H Youth Development

Volunteers will be woven into the fabric of Tennessee 4-H Youth Development, playing a key role in fulfilling the mission of the organization. Caring and knowledgeable volunteers will deliver quality programs that enhance life skill development for Tennessee's youth. This group of diverse volunteers will be vital to the organization, providing innovative ideas and serving as key resources and 4-H ambassadors in their local communities. The effective engagement of trained volunteers will multiply the efforts and accomplishments of UT Extension personnel.

UT Extension aims to provide a safe environment for all persons involved in 4-H Youth Development activities. This application is designed to be an information-gathering aid in order to successfully match the applicant's skills and interests with the appropriate position description and needs of the organization. Answers given by the applicant may be verified.

GENERAL INFORMATION

Name Last First M.I. Name you prefer
Home Address Street, Box, Route, Apt. # How long at this address?
City State ZIP County
Mailing Address (if different)
Email Address How long have you resided in this county?
Phone Daytime Evening Last Four Digits of Social Security Number (required)*

*The last four digits of your social security number or personal tax identification number is required by UT Risk Management for any volunteer or friend of UT. The last four digits of your social security number will be used only once for the assignment of a special UT personnel number. Your SSN will not be released and will remain confidential.

4-H EXPERIENCE

Are you a 4-H alumnus/alumna? Yes No
If yes, where? City County State
If yes, what year(s) were you a 4-H'er?
Have you ever been a 4-H volunteer? Yes No
If yes, where? City County State
Why are you interested in a 4-H volunteer position?
Have you ever worked with youth before? Yes No

If yes, please explain briefly. _____

What time commitment and duration are you considering?

_____ Hrs./week _____ Hrs./month 1-3 months 3-6 months 6-12 months

Do you prefer to work directly with youth adults both

If you prefer to work directly with youth, what age level(s) do you prefer? (Check all that apply.)

Explorer (4th grade) Junior (5th & 6th) Junior High (7th & 8th) Senior: Level I (9th & 10th) Level II (11th & 12th)

TRANSPORTATION

Do you have access to a car? Yes No Do you have a valid driver license? Yes No

Driver License Number

State

Date of Expiration

Have you ever been cited for a traffic violation? Yes No

If yes, please explain. _____

EMPLOYMENT AND VOLUNTEER EXPERIENCE

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

1. _____
Current Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

2. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

3. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

4. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

EDUCATIONAL BACKGROUND

Name of Last High School Attended

State

County

Did you graduate? Yes No

If not, please circle the highest grade completed.

1 2 3 4 5 6 7 8 9 10 11 12 GED

Education Beyond High School (Please begin with current or most recent.)

Institution/City/State

Attended From (Month/Year) To (Month/Year)

Degree

Major

Institution/City/State

Attended From (Month/Year) To (Month/Year)

Degree

Major

Languages Spoken (other than English)

Other Educational or Special Training (CPR training, First Aid training, etc.)

REFERENCES

Please list three people, not related to you, who have knowledge of your qualifications and have known you for at least two years. Please provide complete addresses and phone numbers.

1. _____

Name	Street Address	City/State/ZIP
Day Phone Number	Evening Phone Number	Email Address
Relationship		

2. _____

Name	Street Address	City/State/ZIP
Day Phone Number	Evening Phone Number	Email Address
Relationship		

3. _____

Name	Street Address	City/State/ZIP
Day Phone Number	Evening Phone Number	Email Address
Relationship		

I authorize contacting the references listed on page 3, 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 UT Extension and the Tennessee 4-H Youth Development program and to fulfill my volunteer responsibilities to the best of my ability. I also understand that UT Extension may contact other individuals as needed to verify my fitness and experience in working with youth.

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

13-0104 10/12

Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development. University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating. UT Extension provides equal opportunities in programs and employment.





BACKGROUND DISCLOSURE FORM

Last Name

First Name

M.I.

UT Extension aims to provide a safe environment for all persons involved in 4-H Youth Development activities. This form is designed to be an information-gathering aid in order to successfully match the applicant with a volunteer position.

A "yes" answer does not automatically exclude you from becoming a registered volunteer. If there are any changes in answers to these questions, the volunteer should immediately contact the local Extension office.

1. Have you ever had problems with

a. Substance abuse?

Yes No

b. Criminal behavior?

Yes No

c. Child abuse or neglect?

Yes No

d. Suspension or revocation of your driving privileges?

Yes No

2. Have you ever had an indictment, conviction, imprisonment or fine for any criminal violation including, but not limited to, DUI, substance abuse, child abuse or child neglect?

Yes No

3. If yes, to any of the above questions, give date(s), location(s) and complete name at the time(s).

4. If yes, to any of the above questions, please describe what steps you have taken to correct the problem(s).

5. Other than the above, is there any other fact or circumstance involving you or your background that would affect your ability to be entrusted with the supervision, guidance and care of youth under the age of 18? Yes No (If yes, please explain.)

6. Do you currently have the minimum vehicle insurance coverage required by the State of Tennessee? Yes No

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BACKGROUND SCREENING CONSENT

Form with fields: Last Name, First Name, M.I., *Last Four Digits of Social Security Number, Current Street Address, How long?, Date of Birth, City, State, ZIP, County, Home Phone, Driver License Number, State, Date of Expiration

*The last four digits of your social security number 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.

List below any previous residence(s) (beginning with the most recent) and any alias, maiden or other names for the past seven years. (Include city, state and zip code.)

Three numbered sections for previous residence information with fields: Previous Street Address, How Long at This Address, City, State, ZIP, Alias, Maiden or Other Names

Have you ever been convicted of a misdemeanor or felony other than a misdemeanor traffic violation? [] Yes [] No

If yes, please give date, nature, county/state, and disposition of offense. (Information should include any situation in which the applicant was sentenced for a crime, unless the sentence was reversed on appeal. A criminal record 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 representative of the organization bearing this application to obtain a criminal and traffic violation background check. I give my consent to a criminal and traffic violation background check.

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 and Date lines