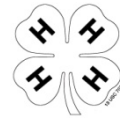


# Missouri 4-H Volunteer Application Form



This application will be handled with the highest degree of confidentiality and stored in a locked, secure location within your local University of Missouri Extension center. This application must be completed in its entirety.

<b>Enrollment status (check one)</b> <input type="checkbox"/> New <input type="checkbox"/> Re-enrollment			
<b>First name</b>		<b>Middle initial</b>	<b>Last name</b>
<b>Previous last names</b> (maiden, previous married, etc.)		<b>Alternate first name</b> (nickname)	<b>Birth date</b> (MM/DD/YYYY)
<b>Primary (home) phone</b>		<b>Work phone</b>	
<b>Mobile phone</b>		<b>Best time to call</b>	
<b>Primary email</b>		<b>Secondary email</b>	
<b>Cell phone provider</b> (for sending you text messages)		<b>Occupation</b>	
<b>Military family type</b> (if applicable)		<b>Send information by</b> (check one) US mail <input type="checkbox"/> Email <input type="checkbox"/>	
<b>Do you require an accommodation for a disability to participate in this program?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.			
<b>Street1</b>		<b>Street2</b>	
<b>City</b>		<b>State</b>	<b>Zip</b>
<b>Ethnicity</b> (check one) Hispanic <input type="checkbox"/> Not Hispanic		<b>Gender</b> (check one) <input type="checkbox"/> Male <input type="checkbox"/> Female	
<b>Residence</b> (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Town of 10,000 to 50,000 <input type="checkbox"/> City of more than 50,000 <input type="checkbox"/> Rural less than 10,000 <input type="checkbox"/> Suburb of more than 50,000			
<b>Race</b> (check all that apply) <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian/Alaskan <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific Islander			
<b>Category</b> (check one) <input type="checkbox"/> Organizational Club Leader <input type="checkbox"/> Project Leader <input type="checkbox"/> Activity Leader <input type="checkbox"/> Resource Leader			
<b>Children in 4-H</b> (list)			
<b>Club Name</b>		<b>Number of years as 4-H volunteer</b>	
<b>Project name</b>		<b>Project code</b>	<b>Years led</b>

**Required confidential information**

All Volunteers: Have you ever....	Yes	No
1. Been convicted of a criminal offense – felony or misdemeanor?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you or have you ever been a registered sex offender?	<input type="checkbox"/>	<input type="checkbox"/>
3. Been charged with child abuse or neglect?	<input type="checkbox"/>	<input type="checkbox"/>
4. Had your driver license suspended or revoked?	<input type="checkbox"/>	<input type="checkbox"/>
5. Other than the above, is there any fact or circumstance involving you or your background that would call into question you being entrusted with the supervision, guidance or care of young people?	<input type="checkbox"/>	<input type="checkbox"/>
6. If you answered yes to any of the above questions, please explain: (A yes answer does not automatically exclude you from becoming a volunteer.)		
Social Security number (for first year volunteers only) _____ - _____ - _____		

**Missouri 4-H Youth Protection Policy for 4-H volunteers**

*A code of ethics all staff and volunteers are expected to observe*

- **Treat youth with respect, caring and acceptance.** I know that all young people are valuable and capable of helping others and improving their community. I will use a democratic approach when working with youth.
- **Honor my volunteer commitment.** I will strive to live up to my volunteer commitment by working the hours necessary to fulfill the volunteer role I have accepted.
- **Keep records, distribute materials and support the 4-H system.** I will distribute 4-H materials to youth and adults. I will keep the required records and turn them in on time. I will assist youth and adults with enrollment, active participation and recognition.
- **Seek training for my volunteer role.** I will participate in meetings, self-study or other training opportunities, which will help me work more effectively with youth and adults.
- **Treat all youth and adults equally, without discrimination.** I will provide equal access to participation for all youth and adults, regardless of race, creed, color, sex, national origin or disability.
- **Provide a safe environment.** I will not harm youth or adults in any way, whether through sexual harassment, physical force, verbal or mental abuse, neglect or other harmful experience.
- **Abstain from using alcohol or any illegal substances while working with, or responsible for youth; neither will I allow youth to do so while under my supervision.**
- **Obey the laws of the locality, state and nation.**
- **Strive to be a positive role model.** By my example, I will help individuals learn to respect and cooperate with others. I will teach others to compete with honesty and fair play.
- **Work as a “team player” for the good of all persons.** I will work cooperatively with other adult volunteers for the good of all involved in the program.
- **Work within the 4-H system.** As a 4-H volunteer, I am accountable for my actions to the county 4-H Council [or similar policy-setting body], county University of Missouri Extension Council, Missouri 4-H Youth Development Programs, and University of Missouri Extension. If my personal conduct is deemed by these bodies to be in violation of this agreement or if I fail to meet any of these eleven policy statements, I understand I may be relieved of my volunteer role.

For the protection of 4-H members and volunteers, a new volunteer application must be completed each year and filed at your local University of Missouri Extension center. All required information must be fully completed for application acceptance.

I understand my signature below authorizes submission of the information on this page and the previous page for child abuse and neglect and criminal records checks, including sexual offenses. In addition, by signing I verify all information provided herein is correct and I agree with and will adhere to the 4-H Youth Protection Policy as printed above.

<b>Date</b> (month, day, year)	<b>Signature of applicant</b>
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