

# **UT Extension** F 809-A

# 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		How long at	this address?
Street, E	Box, Route, Apt. #		
01		710	
City	State	ZIP	County
Mailing Address (if different)			
Email Address	How long	g have you resided in this o	county?
Phone			
Phone Daytime	Evening	Last Fo	our Digits of Social Security Number (required)*
*The last four digits of your social security number or personal tax identification number is assignment of a special UT personnel number. Your SSN will not be released and will rer	s required by UT Risk Management for any volunteer main confidential.	r or friend of UT. The last four digits of your s	social security number will be used only once for the
4-H EXPERIENCE			
Are you a 4-H alumnus/alumna? Yes 🗌 N	0		
If yes, where?			
City	Cour	nty	State
If yes, what year(s) were you a 4-H'er?			
Have you ever been a 4-H volunteer?	No		
If yes, where?			
City	Cour	nty	State
Why are you interested in a 4-H volunteer position?			
Have you ever worked with youth before?	es 🗆 No		

lf yes,	please	explain	briefly.
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What time commitment and duration are you considering?		
Hrs./week Hrs./month 1-3 mo	nths 🔲 3-6 months 🗌 6-12 mon	ths
Do you prefer to work directly with 🗌 youth 🗌 adults	D both	
If you prefer to work directly with youth, what age level(s) do you	prefer? (Check all that apply.)	
Explorer (4 <sup>th</sup> grade) Junior (5 <sup>th</sup> & 6 <sup>th</sup> ) Junior Hig	gh (7 <sup>th</sup> & 8 <sup>th</sup> ) Senior: 🗌 Level I	(9 <sup>th</sup> & 10 <sup>th</sup> ) 🔲 Level II (11 <sup>th</sup> & 12 <sup>th</sup> )
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?	No	
If yes, please explain.		
EMPLOYMENT AND VOLUNTEER EXPER		
(This information is needed for the past 10 years. Please a		
1.		
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.		
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					St	ate					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 o	current or	most r	ecent.)									
Institution/City/State	Attend	led From	(Month/	Year) To	(Month/\	(ear)		Degree			Majo	Dr
Institution/City/State	Attend	led From	(Month/`	Year) To	(Month/\	(ear)		Degree			Majo	or
	Langu	lages Sp	oken (otl	her than	English)							
Other Educa	ational or Sr	necial Tra	aining (C	PR traini	na First	Aid train	na etc.)					
			uning (C	i i t u u u u u	ng, i li st.		ng, cic.)					
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 A	ddress	City/State/ZIP	
	Day Phone Number	Evening Phone Number	Email Address	Relationship	
2.					
	Name	Street A	ddress	City/State/ZIP	
	Day Phone Number	Evening Phone Number	Email Address	Relationship	
3.					
	Name	Street A	ddress	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

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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.





2.



# **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
Have you ever had an indictment, conviction, imprisonment or fine for any criminal violation including, but not limited to, DUI, substance abuse, child advec or child pagest?	🗆 Yes 🗖 No
abuse or child neglect?	

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?



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# **BACKGROUND SCREENING CONSENT**

Last Name	First Name	M.I.	*Last Four Digits of Social Security Number
Curre	nt Street Address	How long?	Date of Birth
City	State	ZIP	County
Home Phone	Driver License Number	State	Date of Expiration
	er are collected for the sole purpose of conducting backgr s, this information is necessary for program participation.	ound clearances. Providing the in	formation is optional; however, for those
	eginning with the most recent) and any alias,	maiden or other names for	the past seven years. (Include
1	Previous Street Address		How Long at This Address
0.1	<b>2</b> .4	715	
City	State	ZIP	Alias, Maiden or Other Names
2	Previous Street Address		How Long at This Address
City	State	ZIP	Alias, Maiden or Other Names
3	Previous Street Address		How Long at This Address
City	State	ZIP	Alias, Maiden or Other Names
Have you ever been convicted of a mis	demeanor or felony other than a misdemeand	or traffic violation?	Yes 🗌 No
	state and disposition of offense (Information		_

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

Date

13-0104 10/12

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