



**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 \_\_\_\_\_ EMAIL \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(must be 19 years of age or older) (Needed for background check reasons)

ADDRESS(ES) FOR PREVIOUS 5 YEARS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME(S) PREVIOUSLY USED \_\_\_\_\_

CURRENT EMPLOYER \_\_\_\_\_

EMPLOYER ADDRESS \_\_\_\_\_

**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  
\_\_\_\_\_ 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                      \_\_\_\_\_ Communications & Expressive Arts  
\_\_\_\_\_ Consumer & Family Sciences                      \_\_\_\_\_ Environmental Ed. & Earth Sciences  
\_\_\_\_\_ Healthy Lifestyles Education                      \_\_\_\_\_ Personal Development & Leadership  
\_\_\_\_\_ Plants                      \_\_\_\_\_ Science & Technology  
\_\_\_\_\_ Animals

**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?                      yes\_\_\_\_                      no\_\_\_\_  
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 nolleed, 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.

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Signature

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Date

Revised 8/19/05