



4-H YOUTH DEVELOPMENT VOLUNTEER APPLICATION

(to be completed by an individual who wishes to volunteer with the Indiana 4-H Youth Development Program)

Individuals who want to volunteer with the Indiana 4-H Youth Development Program must complete this application and show evidence of a government-issued photo ID to the 4-H Youth Development Extension Educator. Consideration as a Purdue University Cooperative Extension Service volunteer is contingent on return of this form to your county Extension office, clearance through the national and state Sex and Violent Offender Registries, and recommendation of approval by the 4-H Youth Development Extension Educator.

I. GENERAL INFORMATION Name:

| (last) | | | | | | |
|--|---------------------------------|---------------------|-----------------|-----------------------|--|--|
| | (first) | | (middle) | | | |
| Former or other names: | Preferred name | | Date of Birth: | | | |
| | | | | (Month/Day/Year) | | |
| Address:(St., RR, Rd., Box, Apt.) | | | IN | (zip) | | |
| (St., RR, Rd., Box, Apt.) | (city) | Б 1 . | | | | |
| How long have you lived at this address? | | e Female N | Not Listed | Prefer not to respond | | |
| Telephone: | | | | (11 1 | | |
| (home) | (work) | (cell) | | (cell phone provider) | | |
| Township of residence: | | I wish to receive | ve texts: Ye | s No | | |
| Residence: Farm Rural (<10,000) | Town (10K-50K) | Suburb (| <50K) | Central City (>50K) | | |
| E-mail address: (please print clearly) | | Preferred Co | mmunicatio | n:E-mail Postal mail | | |
| Military background: Yes No | Branch | | | | | |
| Please indicate your education, experience, tale | nts, interests, and skills that | might be related t | to the 4-H pr | rogram: | | |
| | | | | | | |
| Do you have previous 4-H experience as a member o | r volunteer? Please describe (i | nclude the county o | f participation | n) | | |
| Do you have previous 4-H experience as a member o List previous <i>volunteer</i> experience. Identify work w You may attach additional pages. | <u> </u> | | | | | |
| List previous <i>volunteer</i> experience. Identify work w | <u> </u> | ps (current or most | | | | |
| List previous <i>volunteer</i> experience. Identify work w You may attach additional pages. Organization Volunteer Role | rith youth and community grou | ps (current or most | | ence first). | | |
| List previous <i>volunteer</i> experience. Identify work w You may attach additional pages. Organization Volunteer Role 1 | rith youth and community grou | ps (current or most | | ence first). | | |
| You may attach additional pages. Organization Volunteer Role | rith youth and community grou | ps (current or most | | ence first). | | |

| II. | VOLUNTEER INTEREST: | Why are you in | terested in a vo | lunteer p | position i | n Extension you | th programs? | |
|-------------------------------|--|---|--|---|--|--|---|----------------------------|
| Do y | ou prefer to work directly with: yout | h adults | both | | | | | |
| | u prefer to work directly with youth, what | | | Grad | es K-2 | Grades 3-6 | Grades 7-12 | Any |
| Are | you applying to be a volunteer with a new | club or project? | Yes | No | Club/P | roject | | |
| | you applying to help with an existing club | | | | Name: | | | |
| | | | | | | | | |
| List prev | PERSONAL REFERENCES: (three persons not related to you who know ious experience as a volunteer, one referent all friends. Include complete mailing and | v about your qua | alifications for v m that organiza | vorking tion. Yo | as a volu ou may in | inteer in a youth | | |
| Nam | e | | | | | | | |
| 1 (411) | | | Home Phone | | Work | Phone | Cell Phon | e |
| Add | St, RR, Box, Apt # | | | | | | | |
| | | City | | State | Zip | EMAIL a | address | |
| How | do you know this person? | | | | | | | |
| | | | | | | | | |
| Nam | e | | Home Phone | | Work | Phone | Cell Phon | e |
| Add | ress | | | | | | | |
| · Iuu | St, RR, Box, Apt # | City | | State | Zip | EMAIL a | address | |
| | do you know this person? | | | | | | | |
| | | | | | | | | |
| Nam | e | | | | | | | |
| | | | Home Phone | | Work | Phone | Cell Phon | e |
| Add | St, RR, Box, Apt # | | | | | | | |
| | | City | | State | Zip | EMAIL a | address | |
| How | do you know this person? | | | | | | | |
| Have | VERIFICATION and CONSEN e you been convicted of a crime (excluding s, give date, nature of offense and dispositi | minor traffic vi | | ER BA _ Yes | CKGR | ROUND CHE | CCK: | |
| | | | | | | | | |
| ГОИ | E: A criminal record will not necessarily of | lisqualify an app | olicant; it will be | e consid | ered relat | tive to the specifi | ics of the position. | |
| cond Viol I un | tify that the above information is correct ucted. I authorize the Purdue University Count Offender Registries and to release any derstand the misrepresentation or omissiversity Cooperative Extension Service yo | Cooperative Exte information on t ion of facts req | ension Service to he Registries to uested is just c | o conducthe Pure | ct a searc due Univ | th of the current reersity Cooperation | national and state ve Extension Serv | Sex and ice. |
| If ac Univ Devo Univ | cepted as a volunteer, I agree to respect, accersity Cooperative Extension Service included purpose and all Indiana counties share. As a small origin or ancestry, genetic information is as a veteran in educational experiences in | there to, and conding all laws reoperative Extension volunteer, I am, marital status, | nply with the rulated to child absion Service, in committing to parental status, | ouse and which the involve sexual co | substance he United individua prientation | ee abuse. I recogn d States Departmals regardless of n, gender identit | nize that the 4-H Y tent of Agriculture race, religion, colory and expression, | outh , Purdue or, sex, age |
| | icant signature: | | | | | | | |
| Plea | se return the application at your earliest co | nvenience. Conta | - | | | or wish to receiv | e further informat | ion. |
| | | | RDUE ERSITY | ension - 4-H Yo elopment | outh & S | | | |

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