# OSU Extension 4-H Volunteer Application

Revised 7.31.17

Adults or teens should complete and submit this 2-page application if they are interested in (a) teaching, coaching, advising or chaperoning youth in the 4-H Program; (b) teaching or mentoring volunteers; or (c) working beside Extension 4-H staff to support or conduct 4-H Programs **Submit application (print or online) to local County 4-H Office**. If applicant needs assistance to complete application, contact the OSU County Extension 4-H Office.

| Personal In      | <u>formation</u>  |                                 |                      |  |                   |
|------------------|---|---------------------------------|----------------------|--|-------------------|
| Name             |   |                                 |                      |  |                   |
|                  | First   | Full Middle                     |                      | Last                                   |                   |
| ddress           |   |                                 |                      |  |                   |
|                  | Apt. /Street/Route  |                                 | Town                 | State                                  | Zip               |
| hone(s)          |   |                                 |                      |  |                   |
|                  | Cell  | Home                            |                      | Work – as appropriate                  |                   |
| -Mail            |   |                                 |                      |  |                   |
| Is there i       | egon County are you apply s a specific club with which  | you want to voluntee            | er? Name here        | e:                                     |                   |
| iave you ii      | ved outside of Oregon duri  | ng the past seven (7) y         | ears?                | NoYe                                   | S                 |
| -H volunte       | eers assist in various roles.   | Some roles may requir           | e different ag       | ge qualifications.                     |                   |
| ou are (ch       | eck one):Age 25 or c  | olderAge 19 –                   | 24                   | _Age 18 or younger                     |                   |
| ou are inte      | erested in becoming a 4-H v   | volunteer with the Ore          | egon 4-H Prog        | ram because:                           |                   |
|                  | interests or hobbies that your draising, coaching soccer, kr  |                                 |                      | (e.g., organizing event                | s, building       |
|                  | training or certification tha<br>ertificate, Toast Master leve  |                                 | olunteer role        | : (e.g., Basic 1 <sup>st</sup> Aide co | ard, Mastei       |
| amilial or parer | niversity Extension Service offers educe<br>ntal status, gender identity or expressi<br>on, veteran's status, or because all or | on, genetic information, marita | l status, national o | rigin, political beliefs, race, reli   | gion, reprisal, s |

University Extension Service is an AA/EOE/Veterans/Disabled.

## 4-H Volunteer Application (page 2 of 2)

| counselor 3 summers, 4-H volunteer, 4-H alumni, coached Dar  |                                |
|--|--------------------------------|
|  |                                |
| Other information you would like to share as you are conside   | ered for a 4-H volunteer role: |
| Personal References Ask an employer, neighbor, current 4-H strengths and personal qualities. Do not list a family member. critical to have complete information for three references.) |                                |
| 1. Name  |                                |
| Phone (Home)   | (Cell)                         |
| Mailing Address  |                                |
| E-Mail Address   |                                |
| 2. Name  |                                |
| Phone (Home)(Cell)   |                                |
| Mailing Address  |                                |
| E-Mail Address   |                                |
| 3. Name  |                                |
| Phone (Home) (0  | Cell)                          |
| Mailing Address  |                                |
| E-Mail Address   |                                |
| To the best of your knowledge, this information is correct:  | Applicant Signature Date       |
|  | •                              |
| Return this application to an OSI<br>Thank you for applying to be a 4-   |                                |
| For Extension 4-H Office Use Date application received:  | Application reviewed by:       |

#### **Information for 4-H Volunteer Applicant**

Revised: 7.31.17

#### Oregon 4-H Adult Volunteer Expectations (Copy)

The opportunity to represent OSU as a 4-H volunteer is a privileged role. The purpose of the 4-H Adult Volunteer Expectations is to clarify responsibilities regarding the safety and well-being of Oregon State University programs and all participants. The 4-H volunteer role is assigned to those who are willing to agree to behaviors that fulfill these responsibilities. Volunteers for 4-H are approved by Extension 4-H professionals. Actions contrary to these expectations may result in non-acceptance, suspension or termination of one's 4-H volunteer role.

- 1. Focus on the educational mission of the land grant university, including the equal opportunity and anti-discrimination policies. (4-H programs are accessible without regard to race, color, religion, gender, sexual orientation, national origin, age, marital status, disability, and veteran status.)
- 2. Obey local, state, federal laws. Follow guidelines established for county, state, and national 4-H programs.
- 3. Accept support and/or supervision from Extension program staff or designees.
- 4. Treat others courteously. Be a positive role model. Exhibit good sportsmanship.
- 5. Establish and maintain safe environments for all participants. Act responsibly to protect participants; and, keep confidential information (e.g., health forms) for those who-need-to-know.
- 6. Provide for physical and emotional needs of participants during programs. Not withhold necessities nor use physical punishment. Communicate that verbal, emotional, or physical mistreatment is unacceptable within the program. Report suspected abuse to protect those who cannot protect themselves.
- 7. Not use alcohol, marijuana, or other drugs, or be under those influences, while being responsible for 4-H programs or youth.
- 8. Handle funds and fundraising in an ethical manner and in accordance with federal, state and university regulations. (Fundraising activities must be approved by Extension staff. 4-H funds are public assets, need to be expended for educational purposes, and must not be deposited into a private individual's bank account.)
- 9. Handle equipment and machinery in a safe and responsible manner. Operate vehicles only with a valid operator's license and the legally required insurance coverage.
- 10. Treat animals humanely and provide appropriate care. Teach youth to do the same.

### Information for 4-H Volunteer Applicant (page 2 of 2)

#### The steps to apply to be a 4-H volunteer are to:

|    | Complete and submit the (attached) 4-H Volunteer Application, including complete contact information for three (3)references, who are not family members   |  |  |  |
|----|--|--|--|--|
|    | Submit authorization to conduct a Criminal History Check (CHC) - with official photo identification  |  |  |  |
|    | Successfully complete a background check (CHC) conducted by OSU Human Resources  |  |  |  |
|    | o If applicant has not lived in Oregon consistently for seven years, electronic fingerprinting will be part of a federal background check  |  |  |  |
|    | <ul> <li>If OSU Extension 4-H staff ask the applicant to drive as part of his/her 4-H volunteer role, then<br/>applicant will need to obtain and submit a report from the local Dept. of Motor Vehicles (DMV)</li> </ul> |  |  |  |
|    | Engage in a minimum of three (3) hours of 4-H orientation (combination of online and in-person)  |  |  |  |
|    | Then, (once applicant is approved) complete <u>annual</u> 4-H Volunteer Enrollment as directed by the  |  |  |  |
|    | local 4-H Office, including signing and submitting the following forms:  |  |  |  |
|    | <ul> <li>OSU Conditions of Volunteer Service (including media release and waiver of liability)</li> </ul>  |  |  |  |
|    | <ul> <li>Oregon 4-H Adult Volunteer Expectations (see copy on page 3)</li> </ul>   |  |  |  |
|    | <ul> <li>Health Form and contact information, in case of an emergency</li> </ul>   |  |  |  |
| os | U Extension 4-H staff will:  |  |  |  |
|    | Provide the volunteer applicant all necessary forms to move through the application process  |  |  |  |
|    | Request authorization to conduct a Criminal History Check (CHC) form and track the process with  |  |  |  |
|    | OSU Human Resources office   |  |  |  |
|    | o Re-submit CHC every two (2) years for recheck according to state law and OSU policy  |  |  |  |
|    | Contact and obtain information from three (3) personal references  |  |  |  |
|    | Provide an orientation for new 4-H volunteers  |  |  |  |
|    | May have a conversation with applicant   |  |  |  |
|    | Communicate the status of the application to volunteer applicant   |  |  |  |
|    | Continue to communicate with approved 4-H volunteers to complete 4-H Enrollment annually   |  |  |  |
|    |  |  |  |  |

Applicant, please retain Information for Volunteer Applicants (2 pages) for your 4-H records.

Revised July 31, 2017
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Sponseller, L. Walker, T. White, S. Withee

Reviewed by D. Hart, S. Carlson, W. Hein, K. Herber, C. Sponseller, L. Walker, T. White, S. Withee

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## **Criminal History Check (CHC) EXTENSION VOLUNTEER**

| Office of Human Resources   |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Extension Office Use ONLY: Criminal History Checks cannot be performed unless the information requested below is provided. Incomplete forms will be returned. |  |  |  |  |  |  |  |  |
| OSU Extension Office  |  |  |  |  |  |  |  |  |
| Program Name  |  |  |  |  |  |  |  |  |
| Agent / Contact   |  |  |  |  |  |  |  |  |
| Access Type(s): Check all that apply Driving:   |  |  |  |  |  |  |  |  |
| YP 24 Mo. Recheck Live Animals Fiscal Minors Protected Info Yes No  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
| Volunteer Information:  |  |  |  |  |  |  |  |  |

| *A copy of your OFFIC  | IAL photo ID n   | nust accompar  | ny this release*  |  |  |
|--|--|--|---|--|--|
| FULL Legal Name (Last, First, Middle)  | egal Name (Last, First, Middle)  Check here IF returning Volunteer  Date of Birth (MM/DD/YYYY) |  |   |  |  |
| Other Name(s) Used (maiden name, previo  | ous married name(s),   | , aliases, assumed na                                | ames, etc.)   |  |  |
| Current Mailing Address  |  |  |   |  |  |
| If you have not lived at your current addresseven years of history.  | ss for the last seven  | (7) years, please cor                                | nplete the following providing  |  |  |
| City   | State  | From   | То  |  |  |
| City   | State  | From   | То  |  |  |
| City   | State  | From   | To  |  |  |
| (Add additional pages as necessary)  |  |  |   |  |  |
| Email Address:   |  | Prir   | mary Phone Number:  |  |  |
| I certify and authorize the University or a law enforcemer<br>Authorization for Background Investigation (see page 2). | nt agency to conduct a back . I am also aware of how to  | ground investigation as out access a summary of my r | tlined in the Disclosure Notice and rights under the Fair Credit Reporting Act. |  |  |
| Volunteer Signature: (Parent/Guardian sig  | f Minor) Cur   | Current Date:  |   |  |  |
|  |  |  |   |  |  |
| Mark correspondence as "Confid   | lential"   |  |   |  |  |

Return completed form by one (1) of the methods below only:

Oregon State University, OHR

Email:

Oregon State University, OHR

Email:

OR

FAX:

122 Kerr Administration Bldg Corvallis, OR 97331-2132

employment@oregonstate.edu

541.737.7771

#### DISCLOSURE NOTICE FOR BACKGROUND INVESTIGATION

Oregon State University (the "University") may request, for lawful employment purposes, background information about you from a third party or agency in connection with your application for employment or volunteer service or if you are contracted to provide services to the University. The University may obtain background information, such as criminal history information pursuant to OSU STANDARD 576, Division 055 et seq, credit reports pursuant to ORS 659A.885 (commonly known as "credit history checks"), or other such related reports. A credit history check will only be conducted in narrow circumstances pursuant to statute. Additionally, the University may obtain education history, work history and reference information regarding your employment and performance from current and former employers and personal and professional references in the course of conducting recruitment and selection processes.

The University or a law enforcement agency will prepare or assemble criminal reports, educational history, and other similar background reports for the University's use in conducting a background investigation. The types of information that may be obtained by the University in the course of verifying your background information may include, but are not limited to: address history; criminal records and history; public court records; driving records; accident history; educational history verifications (e.g., dates of attendance, degrees obtained); employment history verifications (e.g., dates of employment, salary information, reasons for termination, etc.); personal and professional references checks; professional licensing and certification checks; and other information bearing on your character, general reputation and personal characteristics. The University will only conduct a criminal background check where the applicant has received separate notification that the position is of a critical or security-sensitive nature pursuant to OSU STANDARD 576-055-0000 et seq. This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses; educational institutions; former employers; personal interviews; and other information sources.

Oregon State University is an affirmative action/equal opportunity employer. You may have rights under Title VII of the Civil Rights Act of 1964. If you wish to obtain further information, you must contact the Oregon Bureau of Labor and Industries.

#### **AUTHORIZATION FOR BACKGROUND INVESTIGATION**

I have carefully read and understand this Disclosure and Authorization Form. By my signature on the front of this document, I consent to the University obtaining background information for purposes related to employment, volunteer service, or contracting for services. My consent includes preparation of background reports and related information by the University or a law enforcement agency and to the release of such background reports and related information to the University and its designated representatives and agents, for the purpose of assisting the University in making a determination as to my eligibility for employment, promotion, retention, volunteer service or for other lawful purposes related to employment or contracting for services. I also authorize the University to obtain any reports or background information necessary to verify my identity and fitness for the position for which I am applying. I understand that refusal to consent to a background check or to release related background information will disqualify me from consideration. I understand that information contained in my employment, volunteer service application or service contract or otherwise disclosed by me before or during my employment or service, if any, may be used for the purpose of obtaining and evaluating background reports on me.

I hereby authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information regarding me that is requested by the University, the University's contracted reporting agency, or law enforcement agency either orally or in writing.

I understand that personally identifiable information, such as date of birth, may be requested by the University or law enforcement agencies solely for the purpose of accurately verifying my identity. I understand that I may be asked by the University to submit my fingerprints or additional information as requested by the University. Failure to submit to fingerprinting or failure to provide additional information to verify my identity will cause me to be removed from further consideration.

I understand that nothing herein may be construed by me as an offer of employment, appointment to a volunteer service position, or a contract for services by the University.

I understand that further consideration by the University of my candidacy is contingent upon my consenting below and, therefore, I acknowledge that I authorize the University to obtain such reports and background information. I understand a copy of my Disclosure and Authorization for Background Investigation form will be maintained on file by the University in accordance with state rules and laws.

I understand that I have the right to receive a copy of my background report from the Oregon State Police, Federal Bureau of Investigation, and records resources that have provided this information to the University.

I also understand that before I am denied employment based, in whole or part, on information contained in the background report received from the reporting agency, I will be provided a copy of the report and a written copy of my rights under the Fair Credit Reporting Act: www.ftc.gov/credit; as applicable. I understand that if I am going to dispute the accuracy of information in the report, I must notify the University within fourteen (14) calendar days of the date of the University's notification letter to me. I understand that appealing the University's decision or challenging information provided to the University by the reporting agency will not cause a delay or postponement of the University hiring process or employment decisions.

I hereby release and discharge, to the extent permitted by law, Oregon State University, its employees, and any individual or agency obtaining information on the University's behalf, for any and all claims known or unknown, damages, losses, liabilities, cost, or other expenses arising from the retrieving, reporting, and disclosure of information in connection with this background investigation.

I understand employees and volunteers whose position descriptions have been designated as critical or security sensitive are required to notify the Chief Human Resource Officer or designee if they are convicted of a crime relevant to determination of fitness as identified in OSU STANDARD 576-055-0060 while serving in these positions. Incumbents in Youth Programs must have criminal history checks repeated every 2 years.