



**Oregon State University
4-H Volunteer Leader
Application Packet
Oregon 4-H Outreach Program
2016-2017**

**If you have any questions please contact
Mario Magaña Álvarez**

OSU Associate Professor & State 4-H Outreach Specialist

Phone: 541-737-0925 OR -- Cell: 503-931-7206 -- FAX: 541-737-0999

Mail: Mario.Magana@oregonstate.edu

URL: <http://oregon.4h.oregonstate.edu/outreach/4h>

Lulú and Lupito via email or through our office:

Email: 4h.outreach@oregonstate.edu

Office: 541-737-0925 or 541-7378798

You can also visit our webpage:

Web: <http://oregon.4h.oregonstate.edu/outreach/4h>

Please return completed application to:

Oregon State University

4-H Outreach Program

123 Ballard Extension Hall

Corvallis, Oregon 97331

Dear 4-H Adult Volunteer Applicant (for non-high school students):

Thank you for expressing your interest in the Oregon State University – Oregon 4-H Outreach Leadership Institute. *“Preparing the Leaders of Today.”*

Here are the steps to becoming a 4-H Volunteer Leader:

- 1) Complete the enclosed **4-H Volunteer Service Application** form. Once it is completed send it to: Oregon State University, 4-H Outreach Program, 123 Ballard Extension Hall Corvallis, OR 97331.
- 2) Complete the **Criminal History Check Release Authorization Form** separately and send it to the address on the bottom of the form: Oregon State University, Office of Human Resources, 200 Cascade Hall, Room 223, Corvallis, OR 97331-2132.
- 3) When the process is complete, you will receive a letter or email from our department notifying you of the status of your application.

*If approved, you will become an official 4-H camp counselor/volunteer leader and be able to start serving the 4-H community by participating in institutes, activities, trainings, conferences, events, and much more!

Thank very much you again for your interest in volunteering for Oregon State University 4-H! If you have any questions about the application process, please contact Mario Magaña Álvarez at the information listed below and he will get back to you as soon as possible. *Hablamos español.*

Together we can make a difference!

Sincerely,

Mario Magaña Álvarez

Associate Professor and State 4-H Outreach Specialist

4-H Youth Development

123 Ballard Extension Hall, Corvallis, OR 97331

E-Mail: Mario.Magana@oregonstate.edu

Office Phone: 541-737-0925, Cell Phone: 503-931-7206, Fax: 541-737-1332



Qualifications and Responsibilities



Position Title: 4-H Volunteer Leader

Purpose of Position: To serve as the leader, role model, supervise, lead and teach workshops and activities to the youth participating in 4-H summer camps, trainings, and other events conducted by Oregon State University 4-H faculty or staff. To assist 4-H faculty and staff in implementing the program, making sure the program runs smoothly and participants are safe, have fun, and learn.

Benefits of the Position: Interaction with younger youth; expand your knowledge; develop leadership skills and new leadership opportunities; meet other young people and professionals with great vision and goals; learn about great scholarships; build a strong resume and earn lots of community service hours; receive letters of recommendation for scholarships and/or work.

Major Duties:

- Serve as leader, role model, and mentor for students during events (if applicable).
- Ensure the health and safety of all participants during day and night.
- Assist 4-H faculty and staff with check-in and check-out on event days.
- Assist instructors in classes, workshops, presentations, and events.
- Be a dorm chaperone for a group of students.
- Touch base with leadership Director/coordinator as needed.
- Support the office staff preparing material, phone calling, entering data, etc.

Other Duties:

- Provide guidance and care to youth.
- Enforce rules and behavioral expectations including dress code.
- Help youth stay on task and respectful during activities.
- Report accidents, problems, and/or successes to both the nurse and Camp Director.
- Lead or supervise classes, physical activities, educational presentations, and other events.

Qualifications/ Requirements:

- Must pass a background check.
- Must submit a complete application.
- Must be a college student/ adult volunteer/ professional.
- Must attend two of the Leadership Institute events (if applicable).
- Must comply with safety regulations.
- Must maintain a positive attitude!

Expenses

- Registration is free for Prospective Adult Volunteers.
- Lodging and meals on site are free for Prospective Camp Counselors/Volunteers.
- Transportation will NOT be provided.



Oregon State University Extension Service 4-H Volunteer Service Application



Personal Information

Legal Name: _____
(Last) (First) (Middle)

Address: _____
City State Zip

Length of time at above address: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Name of nearest elementary school: _____

Occupation: _____ Employer: _____

Do you have special needs for assistance in this application process: _____

Education, Training, Experience

If a student, school attending: _____

Education and/or special training: _____

Languages spoken (other than English): _____

Special skills, interests and/or hobbies: _____

Have you had CPR training? (When): _____ Have you had First Aid training? (when): _____

Background in 4-H and Other Youth Programs

Have you been a 4-H leader before? Yes: ___ No: ___ If yes, where and how long? _____

Are you 4-H alumni? Yes: ___ No: ___ If yes, which state/county? _____

Experience in other youth programs: _____

Memberships in other organizations: _____

References (employer, minister, etc. - **not family members/relatives**) - **Please include complete mailing address.**

1. Name: _____ Home Phone: _____ Work Phone: _____

Address: _____
City State Zip

2. Name: _____ Home Phone: _____ Work Phone: _____

Address: _____
City State Zip

3. Name: _____ Home Phone: _____ Work Phone: _____

Address: _____
City State Zip

Please complete other side

Adult Volunteer Expectations

The Oregon State University Extension Service strives to provide quality leadership for youth participating in 4-H programs. The opportunity to work with youth is a privileged position of trust that should be held only by those who are willing to demonstrate behaviors that fulfill this trust. The following behavior expectations are provided for volunteers working in the OSU Extension Service 4-H Youth Development Program.

1. Treat others in a courteous, respectful manner demonstrating behaviors appropriate to a positive role model for youth.
2. Abide by policies and guidelines of the Oregon State University Extension Service state and county 4-H programs.
3. Obey all laws of the locality, state, and nation, including those related to use of illegal substances, or use of firearms.
4. Make all reasonable effort to assure that 4-H youth programs are accessible without regard to race, color, religion, sex, sexual orientation, national origin, age, marital status, disability, and disabled veteran or Vietnam-era veteran status.
5. Recognize that verbal, sexual, physical abuse, and/or neglect of youth is unacceptable either within or outside the 4-H Youth Development Program. Report suspected abuse.
6. Treat animals humanely and teach 4-H youth to provide appropriate animal care.
7. Operate machinery, vehicles, and other equipment in a safe and responsible manner, and only with a valid operator's license and the legally required insurance coverage.
8. Handle fund raising and finances in an ethical manner.
9. Do not consume alcohol while responsible for youth in 4-H activities nor allow 4-H youth participants under your supervision to consume alcohol or illegal substances.

Why are you interested in a 4-H volunteer position? _____

Please read the following before signing:

- I am aware of, or willing to learn and accept the basic philosophy and objectives of the 4-H Youth Development Program.
- I have read, understand and agree to the OSU Extension Service 4-H Adult Volunteer Expectations.
- I understand that the information I have provided may be verified by contacting persons or organizations identified in this application.
- I affirm that the information given in this application is true. If appointed as a volunteer, I agree to abide by the expectations of the Extension Service and to fulfill the volunteer responsibilities to the best of my ability.
- As part of the screening process to become a volunteer with the Oregon 4-H Youth Development Program, I understand that this volunteer service position is subject to the successful completion of background checks, which may include credit, criminal, and motor vehicle history background checks.
- I understand that the OSU Extension Service has the right to determine individual suitability in the 4-H Youth Development Program and as a volunteer I will comply with those decisions.

Signature of Applicant _____ Date _____ Oregon Drivers License # _____

For Extension office use only

Date Received: _____ Application Reviewed By: _____

Status of References: _____

Status of Background Check: _____

Leader Education (orientation/training): _____

Comments: _____

Approved: _____
Date _____



sources

and Release Authorization EXTENSION VOLUNTEER

Please attach a copy of your official photo ID with this completed release

FULL Legal Name (Last, First, Middle Name) <input type="checkbox"/> New Volunteer <input type="checkbox"/> Returning Volunteer	Date of Birth (MM/DD/YYYY)
Other Name(s) Used (maiden name, previous married name(s), aliases, assumed names, etc.)	
Current Mailing Address	
If you have not lived at your current address for the last seven (7) years, please complete the following.	
City _____ State _____ From _____ To _____	
City _____ State _____ From _____ To _____	
City _____ State _____ From _____ To _____	
City _____ State _____ From _____ To _____ (Add another page if necessary)	
Primary Phone Number	Alternate Phone Number
Email Address	
Position Title Extension Volunteer – NON driving <input type="checkbox"/> Extension Volunteer - driving <input type="checkbox"/> (please submit a non-employment driving history)	
OSU Extension Office: 4-H State Office - Mario Magaña Álvarez Program Name: 4-H Outreach YP Recheck_____	

DISCLOSURE NOTICE AND AUTHORIZATION 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 OAR 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 OAR 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 agreement below, 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 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. If there is a need to verify my identity or if I have lived outside the state of Oregon in the last seven (7) years, 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. 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 Assistant Vice President or Associate Director of the Office of Human Resources if they are convicted of a crime relevant to determination of fitness as identified in OAR 576-055-0060 while serving in these positions. Incumbents in *Youth Programs* may have criminal history checks repeated every 24 months.

By my signature below, I certify and affirm that I have read and understand the above Disclosure Notice and Authorization for Background Investigation form and am aware of how to access a summary of my rights under the Fair Credit Reporting Act. I certify that I have authorized the University or a law enforcement agency to conduct a background investigation about me as outlined herein.

Applicant's Signature (actual signature vs. typed or electronic)	Date
Guardian's Signature (required for minor applicants)	
M I T H L F P I A	

Please mark correspondence "CONFIDENTIAL" and return your completed form to:

**Oregon State University,
Office of Human Resources
200 Cascade Hall, Oregon 97331-2132**

**FAX: 541.737.0468
Email: DPSCHC@oregonstate.edu**