

Dear Prospective 4-H Volunteer:

Attached to this letter you will find a complete 4-H volunteer application packet. I encourage you to review all materials and information thoroughly and contact me at the Extension Office should you have any questions.

First and foremost, you should closely review the enclosed Volunteer Position Description and be sure that you understand the roles and responsibilities of a community club advisor. Once you have reviewed that information, you should complete the Volunteer Application and Policy 1.50/Standards of Behavior. Submit both of these forms to the Extension Office by no later than October 31. *If you are planning to start a new club, we would appreciate it if you could return your advisor packet to our office by October 1.*

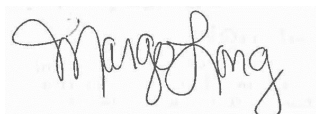
Once you have submitted this information, you should plan to complete your background check. It can take six weeks or longer to receive verification of your background check report from the State. When you go in to have your fingerprints taken, you will need to take the waiver included with this packet, a valid Ohio Driver's License (or state issued identification card), and the appropriate fee (as noted on the waiver form) to cover the cost of having the background check completed.

Once your report is received by the OSU Human Resources Office, they will contact us to verify your eligibility to serve as an Extension Volunteer. After I have reviewed your application, Standards of Behavior, receive notification of your approved background check and at least two references, I will contact you to schedule your interview – which is the last step in the process.

Once your interview is complete, within a week you will receive notification regarding your acceptance to serve as a 4-H volunteer. At that point, if you are accepted, you may begin to work with youth in the capacity of an advisor. I do ask that you not work with club activities in an advisor role until the process is complete. I realize that this may be an inconvenience for a few of you who are anxiously starting new clubs, but is simply appropriate that you wait until the entire process is completed.

Should you have questions or concerns throughout this process, please do not hesitate to contact me. I realize that it may seem cumbersome to complete each step within the screening process, but just remember that we are working to ensure the safety of a very precious group of people—our youth. I certainly feel that we should take every step possible to protect our children.

Yours in 4-H,



Margo Long
Extension Educator, 4-H Youth Development

Ohio 4-H Volunteer Application

I. GENERAL INFORMATION

Full Name: _____ Date of Birth (MM/DD/YY): _____

Street Address: _____

City/State/Zip: _____ Length of time at this address (years): _____

Phone: Home: _____ Best Time to Call: _____

Cell: _____ Best Time to Call: _____

Work: _____ Best Time to Call: _____

School District: _____ Email: _____

Are You a 4-H Alumni: Yes No If yes, what state and county: _____

Demographic Information

Occupation (optional): _____ Level of Education (optional): _____

Ethnicity: Hispanic Non-hispanicRace: White Black American Indian/Alaskan Native Hawaiian/Pacific Islander AsianResidence: Farm Town/Rural (<10,000) Town (10,000-50,000) Suburb (< 50,000) City (> 50,000)Military Service: No one in my family is currently serving My Parent serves My Sibling serves
 My Son/Daughter serves I/my spouse/partner serveBranch of Service: Air Force Army Coast Guard Marines NavyBranch Component: Active Guard Reserves

Health Considerations/Notes (i.e., food allergy, diabetes, etc...): _____

II. VOLUNTEER INTEREST

Why are you interested in volunteering for the Ohio State University Extension 4-H Program?



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES

ohio4h.org

CFAES provides research and related educational programs to clientele on a nondiscriminatory basis. For more information: go.osu.edu/cfaesdiversity.

Do you prefer to work directly with youth or adults? Youth Adults Both

If you prefer to work directly with youth, what age level(s) do you prefer?

Ages 5-8 Ages 9-12 Ages 13-19 No Preference

Type of 4-H Volunteer Position:

- 4-H Club:** Organizational Leader Cloverbud Leader Project Leader Resource Leader
- Project Area Interests:** _____
- Committee Member – list committee:** _____
- Camp** (check all that apply): Residential Day
- Special Interest/Emphasis Program – list program:** _____
- After-School Program – list site:** _____
- Community Center/Youth Organizational Partner – list site:** _____
- Other:** _____

If you are applying to volunteer with a community/project club, will you be requesting to start a new club or assisting with an existing club? New Existing

If existing, name of club: _____

What time commitment do you initially desire to give?

Previous Work Experience (list current or most recent experience first):

Employer	Position Title	Year
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Previous Volunteer Experience (list current or most recent experience first):

Employer	Position Title	Year
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III. PERSONAL REFERENCES

Have you ever been convicted of a misdemeanor or a felony? _____ Yes _____ No

If yes, please give date, nature, and disposition of offense:

Please note: A criminal record will be considered as it relates to specifics of the volunteer position for which you are applying. A criminal record may prevent an individual from volunteering, depending on the nature of the offense.

References: List **non-family members** who have knowledge of your skills, abilities, and qualifications. Individuals should have worked with you on projects and activities and/or have direct experience with or knowledge of your qualifications. Please provide complete addresses, phone numbers and e-mail addresses.

Name: _____ **Relationship:** _____

Street Address: _____ **City/State/Zip:** _____

Email: _____ **Phone:** _____

Name: _____ **Relationship:** _____

Street Address: _____ **City/State/Zip:** _____

Email: _____ **Phone:** _____

Name: _____ **Relationship:** _____

Street Address: _____ **City/State/Zip:** _____

Email: _____ **Phone:** _____

I authorize the contact of listed references and understand that I am required to submit to a fingerprint criminal background check prior to final consideration of my application to volunteer. I understand that misrepresentation or omission of required information is just cause for non-appointment as a volunteer with Ohio State University Extension. I understand that I serve at the pleasure of Ohio State University Extension and agree to abide by the policies of Ohio State University Extension and the Ohio 4-H Program and to fulfill the volunteer responsibilities to the best of my ability.

Permission to use photographic form for promotion contingent upon completing volunteer process:

Ohio State University Extension would like to share the positive results of youth and volunteer participation in Extension and 4-H Youth Development events. However, in some cases, volunteers may prefer not to permit such publicity.

___ I GIVE ___ I DO NOT GIVE the Ohio State University permission to publish in print, electronic, or video formats the likeness or image of myself. I release all claims against the University with respect to copyright ownership and publication including any claim for compensation related to use of the materials. (If not completed, OSU Extension will not use publicity about your participation).

Applicant Signature: _____ **Date:** _____

VOLUNTEER STANDARDS OF BEHAVIOR

These Standards of Behavior are accepted by volunteers who commit to an Ohio State University Extension (“OSUE” or “Extension”) program as a condition of their volunteer status. The Standards of Behavior shall guide volunteer’s behavior during their involvement in Extension programs. Just as it is a privilege for Ohio State University to work with individuals who volunteer their time and energies to the organization, a volunteer’s involvement with OSUE is a privilege and a responsibility, not a right.

OSUE provides quality educational programs accessible to all Ohio citizens. The primary purpose of this Standard of Behavior is to ensure the safety and well-being of all Extension program participants (i.e., members, their parents and families, professionals, and volunteers). Volunteers are expected to function within the guidelines of OSUE and the individual program area (4-H, Agricultural & Natural Resources, Family & Consumer Sciences, and Community Development). Extension volunteers shall act with personal integrity.

Ohio State University Extension volunteers will:

- Uphold volunteerism as an effective way to meet the needs of youth and adults.
- Uphold each individual’s right to dignity, self-development, and self-direction.
- Accept supervision and support from professional Extension staff while involved in the program.
- Accept the responsibility to represent their individual county Extension program and The Ohio State University.
- Conduct themselves in a courteous and respectful manner, exhibit good sportsmanship, and provide positive role models for all youth.
- Respect, adhere to, and enforce the rules, policies, and guidelines established by their individual county Extension program and OSUE.
- Not engage in abusive behaviors that physically or verbally threaten or harm any Extension program participant, including youth.
- Not engage in any act prohibited by law.
- Comply with all civil rights laws and policies, including but not limited to OSUE equal opportunity, anti- discrimination laws, and program participant policy.
- Perform duties in a responsible and timely manner as outlined in the position description.
- Immediately report any threats to the volunteer’s emotional or physical well-being to the county Extension professional.
- Accept the responsibility to promote and support Extension programs in order to develop an effective county, state, and national program.
- Handle animals and operate machinery, vehicles, and other equipment in a responsible manner.

I understand and agree that as a volunteer:

- In accordance with Ohio State University policy, *Self-Disclosure of Criminal Convictions Policy 4.17*, I am required to self-disclose criminal convictions within three business days of the conviction.
- I will uphold and support the responsible and lawful use of social media. In so doing, I will not create or post social media content that is abusive, threatening, defamatory, obscene, harassing, or creates a hostile environment.
- I will report any child abuse, sexual abuse, or neglect in accordance with university policy
- I will not intentionally or purposefully place myself in a position alone with a member of a vulnerable population in a one-on-one situation, including, but not limited to sleeping quarters with participants.
- I will not, under any circumstances, physically, verbally, or emotionally abuse or fail to provide the basic necessities of care, such as food or shelter to participants.
- I will endeavor to provide a safe and healthy program/camp experience for all participants.
- My volunteer status is subject to immediate suspension or termination based on any act or omission that Extension determines to be contrary to any portion of these standards or otherwise in conflict with the goals of OSUE.

I have read, understand, and agree to be bound by the **VOLUNTEER STANDARDS OF BEHAVIOR** outlined above.

Volunteer Signature

Date

CFAES provides research and related educational programs to clients on a nondiscriminatory basis. For more information:

<http://go.osu.edu/cfaesdiversity>.



4-H Volunteer Criminal History Fingerprint Background Check Procedure

Please take this page with you when you go to have your background check.

In Marion County, 4-H volunteers should have their background check done at:

SEE SECOND PAGE.

tape receipt in this area

What You Need to Get Your Ohio 4-H Background Check

1. A government issued photo ID – such as your driver’s license – with your current address, and showing your date of birth.
2. Your Social Security number – Know your number? No need to bring your SS card.
3. Use **2151.86** as the reason code you are having the background check.
4. If you have not lived in Ohio for the past 5 years, you must also have an FBI report.
5. Background check results **must be mailed to:**

Attention: Background Checks – 4-H Marion COUNTY
 OSU Office of Human Resources
 1590 N. High St., Ste. 300
 Columbus, Ohio 43201

If the agency is not able to get a good scan of your fingerprints, please ask for an inked fingerprint card. You will then bring the inked card to the Extension office.

Note: The fingerprint background check process reveals past criminal convictions. The Ohio Revised Code specifies certain criminal convictions as disqualifying events that forbid current and future volunteer involvement with Ohio 4-H and OSU Extension. You can view this list at: <http://go.osu.edu/Dqoffenses>.

If you would like to be reimbursed for the cost of your background check, keep your original receipt and bring it, along with this form, to your county OSU Extension office. Complete the form below and be sure your name appears on your receipt. We will submit a reimbursement request for you. The check will be mailed from OSU in Columbus; it may take eight to ten weeks to process and will not say 4-H, but OSU.

OSU Extension 4-H Volunteer Request for Reimbursement

Volunteer Name (Print first, middle, last): _____

Volunteer Signature: _____ Date: _____

<i>For office use only. Tape receipt to top of this form before scanning.</i>	
Date volunteer reimbursement request received at Extension Office: _____	<i>(month / day / year)</i>
Name & initials of OSU Extension Professional receiving request: _____	Initials: _____



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Locations in Marion County:

Marion County Sherriff's Office
00 Executive Drive
Marion, OH 43302

Monday, Wednesday and Friday – 9 a.m. – 2:45 p.m.
BCI - \$32.00

North Central Ohio Educational Service Center
333 E. Center Street
Marion, OH 43302

Monday – Friday – 8 a.m. – 4 p.m.
BCI - \$30.00

Other sites in Marion are listed at
www.ohioattorneygeneral.gov/Services/Business/WebCheck/Webcheck-Community-Listing