



North Carolina 4-H Volunteer Application

GENERAL INFORMATION

| | | | | | |
|---------------------------------------|--|---------------|-----|--|-----------------|
| Last Name | | First Name | | M.I. | Name You Prefer |
| Mailing Address | | | | How long at this address? | |
| City | | State | Zip | County | |
| If less than a year, previous address | | | | How long have you resided in the county? | |
| City | | State | Zip | Email Address | |
| Daytime Phone | | Evening Phone | | Best Time to Call | |

4-H EXPERIENCE

| | | |
|---|--|--|
| Are you a 4-H Alumnus? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, where? City _____ State _____ | If yes, what year(s) were you a 4-Her? |
| Have you ever been a 4-H volunteer? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, where? City _____ County _____ State _____ | |
| Why are you interested in a 4-H Volunteer position? | | |
| What time commitments are you considering? _____ hrs./week _____ hrs./month | Have you ever worked with youth before? Please explain briefly. <input type="checkbox"/> Yes <input type="checkbox"/> No _____ _____ | |

TRANSPORTATION

| | | | |
|---|--|---|---|
| Do you have access to a car? <input type="checkbox"/> Yes <input type="checkbox"/> No | Do you have a valid drivers license? <input type="checkbox"/> Yes <input type="checkbox"/> No | Drivers license number and state DL# _____ State _____ | Date of Expiration _____/_____/_____ |
| Have you ever received a traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, please explain. | | |

(Continued on page 2)

North Carolina 4-H Volunteer Application

EMPLOYMENT AND VOLUNTEER EXPERIENCE

(This information is needed for the past 10 years. Please attach extra pages as necessary.)

| | | | |
|--|---------------|---------------------------------|--|
| Current Occupation/Volunteer Position | | Employer/Organization | |
| Employer/Organization Address | | Employer/Organization Telephone | |
| City, State, Zip | Email Address | Employed From/To | |
| Previous Occupation/Volunteer Position | | Employer/Organization | |
| Employer/Organization Address | | Employer/Organization Telephone | |
| City, State, Zip | Email Address | Employed From/To | |
| Previous Occupation/Volunteer Position | | Employer/Organization | |
| Employer/Organization Address | | Employer/Organization Telephone | |
| City, State, Zip | Email Address | Employed From/To | |

EDUCATIONAL BACKGROUND

| | | | | |
|---|--|--|------------|-------|
| Name of Last High School Attended | | State | County | |
| Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No | Did you receive a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No | If not, please circle highest grade completed. 1 2 3 4 5 6 7 8 9 10 11 12 GED | | |
| Education Beyond High School (Please begin with current or most recent.) | | | | |
| Institution/City/State | Dates Attended From: To: | Degree | Month/Year | Major |
| Institution/City/State | Dates Attended From: To: | Degree | Month/Year | Major |

(Continued on page 3)

North Carolina 4-H Volunteer Application

REFERENCES

| | | |
|---|---------------------------|--------------|
| Please list three persons, not related to you, who have knowledge of your qualifications and have known you for at least two years. Please provide complete addresses and phone numbers. | | |
| Name | Address, City, State, Zip | |
| Telephone Number Day Evening | Email Address | Relationship |
| Name | Address, City, State, Zip | |
| Telephone Number Day Evening | Email Address | Relationship |
| Name | Address, City, State, Zip | |
| Telephone Number Day Evening | Email Address | Relationship |

I authorize contacting the listed references, previous employers, and volunteer organizations. I understand the omission or misrepresentation of information requested may result in non-appointment or dismissal as a 4-H volunteer. If appointed as a volunteer, I agree to abide by the policies of the North Carolina Cooperative Extension and the North Carolina 4-H Program and to fulfill my volunteer responsibilities to the best of my ability.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant Signature _____ Date _____

| |
|--|
| <u>For Office Use Only</u> |
| The reference check was: <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory |
| Date of reference check: _____ Name of person conducting the check: _____ |
| If unsatisfactory, please explain _____ _____ |

(Continued on page 4)

North Carolina 4-H Volunteer Application

This information is requested solely for the purpose of determining compliance with Federal civil rights laws; your response will not affect consideration of your application. 4-H policy prohibits unlawful discrimination based on race, sex, color, creed, religion, national origin, age, disability, or political affiliation.

DEMOGRAPHIC DATA

| | | | | | |
|--|---|---|---|-----------|---|
| Last Name | First Name | M.I. | | | |
| Maiden Name | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | Date of Birth _____ / _____ / _____ Month Day Year | | | |
| Ethnic Group <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Hispanic or Latino Ethnicity & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) </td> <td style="width: 34%; vertical-align: top; text-align: center;"> OR </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Not Hispanic or Latino & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) </td> </tr> </table> | | | <input type="checkbox"/> Hispanic or Latino Ethnicity & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) | OR | <input type="checkbox"/> Not Hispanic or Latino & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) |
| <input type="checkbox"/> Hispanic or Latino Ethnicity & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) | OR | <input type="checkbox"/> Not Hispanic or Latino & <input type="checkbox"/> White (only) <input type="checkbox"/> Black or African American (only) <input type="checkbox"/> American Indian or Alaska Native (only) <input type="checkbox"/> Asian (only) <input type="checkbox"/> Native Hawaiian or Pacific Island (only) <input type="checkbox"/> White & Black <input type="checkbox"/> White & American Indian or Alaska Native <input type="checkbox"/> Black & American Indian or Alaska Native <input type="checkbox"/> Black & Asian <input type="checkbox"/> Balance (other combinations) | | | |

(Continued on page 5)

North Carolina 4-H Volunteer Application

BACKGROUND SCREENING CONSENT

| | | | |
|-----------------|--|--------------------------------------|---------------------------------|
| Last Name | First Name | M.I. | *Social Security Number |
| Current Address | | Since when? | Date of Birth ____/____/____ |
| City | State | Zip | County |
| Home Phone | Drivers licenses number and state DL# _____ State _____ | Date of Expiration ____/____/____ | |

List below previous residence(s) (city, state, zip) and any alias, maiden, or other names for the past seven years. (Please begin with the most recent address.)

| | | | |
|------------------|-------|-----|-------------------------------|
| Previous address | | | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |
| Prior Address | | | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |
| Prior Address | | | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |

| | |
|--|---|
| <p>Have you ever been convicted of a misdemeanor or felony other than a misdemeanor traffic violation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>If yes, please give date, nature, county/state, and disposition of offense. (Information should include any situation in which the applicant was sentenced for a crime, unless the sentence was reversed on appeal. A criminal record will not necessarily prevent an applicant from becoming a 4-H volunteer, but rather will be considered as it relates to specifics of the volunteer position for which you are applying.)</p> |
|--|---|

I hereby authorize the 4-H agent or authorized representative of the organization bearing this application to obtain and release any information pertaining to my background for the sole use of obtaining a criminal and traffic violation background check. I give my consent to a criminal and traffic violation background check.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant Signature _____ Date _____

*Social security numbers are collected for the sole purpose of conducting background clearances. Providing the information is optional, however, for those positions that require criminal background checks, this information is necessary for program participation.

For Office Use Only

The criminal background check was: Satisfactory Unsatisfactory

Date of background check: _____ Name of person conducting the check: _____

If unsatisfactory, please explain _____

Prepared by: Harriett C. Edwards, Ed.D