$30.00 fee + $10.00 leader dues = $40.00 TOTAL

4-H Volunteer Application

This form should be used when applying to be a new 4-H volunteer.

Montana State University Extension: 4-H Youth Development

18 USC 707

I. General Information

Legal Last Name_____First_____Middle _____

Current Address _____County_____

City_____State_____Zip_____

How long have you lived at this address? _____ Email:_____

Daytime Phone Number_____Evening Phone Number _____

Are you a 4-H Alumnus? ☐ Yes ☐ No If yes, where were you a member? _____

Have you previously been a 4-H Volunteer? ☐ Yes ☐ No If yes, how many years? _____

Where?_____In what role? _____

Are you an employee of MSU? ☐ Yes ☐ No If yes, what campus and department?_____

List your prior addresses for the last 5 years and length of time you lived at each.

Address _____

City _____State_____Zip_____years at this address _____

Address _____

City _____State_____Zip _____years at this address _____

II. Volunteer Interest

Please describe why you are interested in a 4 H volunteer position.

_____

_____

_____

I prefer to work with... ☐ Youth ☐ Adults ☐ Both

What type of volunteer position are you interested in? _____

Volunteer Experience (list current or more recent roles)

Organization	*Location*	*Role*	*Contact*	*Year(s)*

The Montana State University Extension Service is an ADA/EO/AA/Veteran's Preference Employer and Provider of Educational Outreach.

III. Personal Background

*If you answer **yes** to any of the following, please explain on the lines provided below.*

a. Have you been convicted of a criminal offense in the past seven years? . . . . . ☐ Yes ☐ No

b. Have you ever been charged with child abuse or neglect? . . . . . ☐ Yes ☐ No

c. Have you ever been reported to a child protection agency for child abuse or neglect? ☐ Yes ☐ No

d. Has your driver's license ever been suspended or revoked? . . . . . ☐ Yes ☐ No

e. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people? . . . . . ☐ Yes ☐ No

Explanation (**include year of incident**): _____

_____

_____

Do you have a current/valid driver's license? . . . . . ☐ Yes ☐ No

IV. References

Please provide names, addresses, and phone numbers of three persons not related to you who have knowledge of your character and qualifications. Please indicate your association with these individuals.

Name _____ Association _____

Phone _____ Address _____

Name _____ Association _____

Phone_____Address _____

Name _____ Association _____

Phone _____ Address _____

Signature and Authorization

I authorize MSU Extension to conduct checks of my Personal Background. I understand that misrepresentation or omission of information requested is just cause for non-appointment or removal as a 4-H volunteer. I also understand that this information will be reviewed by 4-H personnel in order to make decisions regarding my 4-H volunteer capacity.

Signature_____Date_____

Please return this form at your earliest convenience to the Extension Office. Feel free to contact us if you have any questions or wish further information. Thank you.

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