4-H Leader Enrollment Form
Oregon State University Extension Service
Harney County   Revised Sept 2008

Last Name____________________________  First Name__________________________  Middle Initial______

Male____  Female____  Years as 4-H volunteer _________

Mailing Address_________________________________________ City________________State _____Zip_______

Home Phone_____________________________ Other Phone_____________________________

Work Place ________________________________________ Work Phone_____________________________

Email_________________________________________ Would you like to receive newsletter by email________

I Have received the Leaders Training ____ Yes ____No

Leader Role: _____Project Leader _____ Activity Volunteer _____Resource Volunteer _____ Community Leader

4-H Clubs:
1) 4-H Club Name_________________________________________ Project________________________________

2) 4-H Club Name_________________________________________ Project________________________________

Disabilities____No ____Yes  Please list_______________________________________________________________

____Hispanic  ____Not Hispanic

_____White _____ Black or African American  _____American Indian or Alaskan Native

_____Asian  _____Native Hawaiian  _____White and Black  _____White and Am. Indian/AK Native

_____Black and Am Indian/AK Native  _____White and Asian

Residence:  ______ Farm  ______ Town and rural non farm

Mark projects you lead below
   __ Art  __ Foods and Nutrition  __Swine  
   __ Babysitting  __ Gardening  __ Woodworking  
   __ Beef  __ Goats  
   __ Camp Counselor  __ Horse  
   __ Cavies  __ International Programs  Other__________________
   ___ Citizenship  __ Jr Leadership  
   __ Clothing  __ Knitting  
   __ Computer  __ Leadership  
   __ Crafts  __ Leathercraft  
   __ Crochet  __ Llama  
   __ Dairy Cattle  __ Photography  
   __ Dogs  __ Poultry  
   __ Entomology  __ Rabbits  
   __ Fiber Arts  __ Scrapbooking  
   __ Food Preservation  __ Sheep

Please sign Volunteer Expectations reverse 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 privilege position of trust that should be held by those who are willing to demonstrate behaviors that fulfill that trust. The following behavior expectations are provided for volunteer 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 substance, 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 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.

* I have read, understand and agree to the OSU Extension Service 4-H Adult Volunteer Expectations.
* I have read and understand the information contained in the publication “For the Well-being of Youth and Adults” (4-H 0258L) and agree to follow the adult/youth interaction-barriers to abuse guidelines contained in this publication.
* Use my name, hometown, image and voice on videotape, audiotape, Film, Photograph, or in any other medium, including the World Wide Web for educational fundraising, or promotional purposes.

________________________________________________                                   ______________________
Signature   Date

revised   September 2008