



Extension Service Lincoln County

Oregon State University, 1211 SE Bay Blvd., Newport, Oregon 97365
T 541-574-6534 | F 541-265-3887 | <http://extension.oregonstate.edu/lincoln/>

Lincoln County 4-H Leader Application Process

Thank you for your interest in becoming a Lincoln County 4-H Leader. In this envelope, you will find all the necessary paperwork to apply for that position and enroll in the program. Although they may feel somewhat cumbersome or redundant, each form has a specific purpose and destination, therefore we appreciate your completing each one attentively.

A complete application includes:

- **Volunteer Application** – this document includes a page explaining the screening process plus the two page application. Please be sure to sign the second page.
- **Three copies of 4-H Reference Form A** – please supply a copy of this form to each of your listed references. Our county requires that the volunteer applicant follow up with their own references to ensure that paperwork is sent to the Extension Office. (Note: Forms from references should be mailed directly to our County Extension Office at the above address so the reference is encouraged to offer honest input.) If you wish to know which references have sent in their forms, you may contact our office.
- **Criminal History Check Release** – please complete both pages and send those along with a copy of your photo ID to either the Extension Office or directly to OSU as described on the second page.
- **Volunteer Enrollment Form** – Once you have been approved as a leader, you will need to complete this official enrollment form. Many potential leaders prefer to complete this form now and submit it along with their application to save time. If you prefer to wait until you are approved, please note that you will not be officially enrolled and a leader until this form is submitted. You will also need to pay the fee to the Lincoln County 4-H Leaders' Association, which helps covers the cost of insurance and other expenses.

If you have any questions now or at any point during the process, please don't hesitate to contact me at 541-648-6815, todd.williver@oregonstate.edu or my program assistant, Heather Tower, at 541-574-6534 EXT. 57411, heather.tower@oregonstate.edu.

Thank you again for your interest in becoming a 4-H leader in Lincoln County.

Respectfully,

Todd Williver
4-H Program Coordinator

Oregon State University Extension Service offers educational programs, activities, and materials without discrimination based on age, color, disability, gender identity or expression, marital status, national origin, race, religion, sex, sexual orientation, or veteran's status. Oregon State University Extension Service is an Equal Opportunity Employer.

Oregon State University Extension Service

4-H Volunteer Screening and Education Process

Screening Process Rationale:

The Extension Service is committed to providing a safe environment for young people participating in its programs. With this in mind, the Extension Service will provide the needed screening and education for potential volunteers to feel comfortable and safe in taking on various roles within the 4-H Youth Development Program. In addition, extensive media coverage has enhanced our society's awareness of child protection issues. Because of concerns surrounding these issues, most major youth serving agencies have instituted screening, orientation and training processes.

Purpose of screening and education for potential 4-H volunteers:

- To provide a safe environment for young people and adults involved in the 4-H Youth Development Program.
- To help insure the selection and placement of qualified volunteers for the 4-H Youth Development Program.
- To help potential volunteers feel ready for their role as a 4-H leader.
- To help potential volunteers understand the 4-H program in order to make informed decisions about their involvement.

The Oregon 4-H Youth Development Program Screening Process Includes:

- All potential volunteers will be required to complete a 4-H Volunteer Service Application—this includes providing the names, addresses, and phone numbers of three references.
- All potential volunteers need to 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. Routinely this will include looking for the following types of convictions:
 - Crimes involving offenses against children
 - Crimes involving physical harm to another person
 - Crimes involving a firearm
 - Crimes involving mistreatment or abuse of animals
 - Crimes involving theft or dishonesty—within the past ten years
 - Crimes involving possession of a controlled substance—within the past ten years
- All potential volunteers will be required to participate in a minimum of 2 hours of training related to their volunteer role.
- Individual counties and project areas may have additional requirements related to becoming a 4-H volunteer.

The Oregon 4-H Youth Development Program

4-H is a community of young people across America who are learning leadership, citizenship and life skills.

OSU Extension

4-H Volunteer Application

Revised 7.31.17

Adults or teens should complete and submit this 2-page application if they are interested in (a) teaching, coaching, advising or chaperoning youth in the 4-H Program; (b) teaching or mentoring volunteers; or (c) working beside Extension 4-H staff to support or conduct 4-H Programs **Submit application (print or online) to local County 4-H Office.** *If applicant needs assistance to complete application, contact the OSU County Extension 4-H Office.*

Personal Information

Name _____
First Full Middle Last

Address _____
Apt. /Street/Route Town State Zip

Phone(s) _____
Cell Home Work – as appropriate

E-Mail _____

In which Oregon County are you applying to be a 4-H volunteer? _____

Is there is a specific club with which you want to volunteer? Name here: _____

Have you lived outside of Oregon during the past seven (7) years? _____ No _____ Yes

4-H volunteers assist in various roles. Some roles may require different age qualifications.

You are (check one): ___Age 25 or older ___Age 19 – 24 ___Age 18 or younger

You are interested in becoming a 4-H volunteer with the Oregon 4-H Program because:

Your skills, interests or hobbies that you could contribute to 4-H include: *(e.g., organizing events, building robots, fundraising, coaching soccer, knitting, speaking another language)*

Education, training or certification that may apply to a 4-H volunteer role: *(e.g., Basic 1st Aide card, Master Gardener certificate, Toast Master level 3)*

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4-H Volunteer Application (page 2 of 2)

Your experience in 4-H, youth programs or other organizations includes: (e.g., worked as youth camp counselor 3 summers, 4-H volunteer, 4-H alumni, coached Dance Team, developed lessons for Scouts)

Other information you would like to share as you are considered for a 4-H volunteer role:

Personal References Ask an employer, neighbor, current 4-H volunteer, or friend who knows you, your strengths and personal qualities. Do not list a family member. *(To efficiently process a volunteer application it is critical to have complete information for three references.)*

1. Name _____

Phone (Home) _____ (Cell) _____

Mailing Address _____

E-Mail Address _____

2. Name _____

Phone (Home) _____ (Cell) _____

Mailing Address _____

E-Mail Address _____

3. Name _____

Phone (Home) _____ (Cell) _____

Mailing Address _____

E-Mail Address _____

To the best of your knowledge, this information is correct: _____
Applicant Signature _____ Date _____

Return this application to an OSU Extension 4-H Office.
Thank you for applying to be a 4-H volunteer in Oregon.

For Extension 4-H Office Use Date application received: _____ Application reviewed by: _____

Comments:

Information for 4-H Volunteer Applicant

Revised: 7.31.17

Oregon 4-H Adult Volunteer Expectations (Copy)

The opportunity to represent OSU as a 4-H volunteer is a privileged role. The purpose of the *4-H Adult Volunteer Expectations* is to clarify responsibilities regarding the safety and well-being of Oregon State University programs and all participants. The 4-H volunteer role is assigned to those who are willing to agree to behaviors that fulfill these responsibilities. Volunteers for 4-H are approved by Extension 4-H professionals. Actions contrary to these expectations may result in non-acceptance, suspension or termination of one's 4-H volunteer role.

1. Focus on the educational mission of the land grant university, including the equal opportunity and anti-discrimination policies. (4-H programs are accessible without regard to race, color, religion, gender, sexual orientation, national origin, age, marital status, disability, and veteran status.)
2. Obey local, state, federal laws. Follow guidelines established for county, state, and national 4-H programs.
3. Accept support and/or supervision from Extension program staff or designees.
4. Treat others courteously. Be a positive role model. Exhibit good sportsmanship.
5. Establish and maintain safe environments for all participants. Act responsibly to protect participants; and, keep confidential information (e.g., health forms) for those who-need-to-know.
6. Provide for physical and emotional needs of participants during programs. Not withhold necessities nor use physical punishment. Communicate that verbal, emotional, or physical mistreatment is unacceptable within the program. Report suspected abuse to protect those who cannot protect themselves.
7. Not use alcohol, marijuana, or other drugs, or be under those influences, while being responsible for 4-H programs or youth.
8. Handle funds and fundraising in an ethical manner and in accordance with federal, state and university regulations. (*Fundraising activities must be approved by Extension staff. 4-H funds are public assets, need to be expended for educational purposes, and must not be deposited into a private individual's bank account.*)
9. Handle equipment and machinery in a safe and responsible manner. Operate vehicles only with a valid operator's license and the legally required insurance coverage.
10. Treat animals humanely and provide appropriate care. Teach youth to do the same.

Information for 4-H Volunteer Applicant (page 2 of 2)

The steps to apply to be a 4-H volunteer are to:

- Complete and submit the (attached) *4-H Volunteer Application*, including complete contact information for three (3) references, who are not family members
- Submit authorization to conduct a *Criminal History Check (CHC)* - with official photo identification
- Successfully complete a background check (*CHC*) conducted by OSU Human Resources
 - If applicant has not lived in Oregon consistently for seven years, electronic fingerprinting will be part of a federal background check
 - If OSU Extension 4-H staff ask the applicant to drive as part of his/her 4-H volunteer role, then applicant will need to obtain and submit a report from the local Dept. of Motor Vehicles (DMV)
- Engage in a minimum of three (3) hours of 4-H orientation (combination of online and in-person)
- Then, (once applicant is approved) complete annual *4-H Volunteer Enrollment* as directed by the local 4-H Office, including signing and submitting the following forms:
 - *OSU Conditions of Volunteer Service* (including media release and waiver of liability)
 - *Oregon 4-H Adult Volunteer Expectations* (see copy on page 3)
 - *Health Form* and contact information, in case of an emergency

OSU Extension 4-H staff will:

- Provide the volunteer applicant all necessary forms to move through the application process
- Request authorization to conduct a *Criminal History Check (CHC)* form and track the process with OSU Human Resources office
 - Re-submit *CHC* every two (2) years for recheck according to state law and OSU policy
- Contact and obtain information from three (3) personal references
- Provide an orientation for new 4-H volunteers
- May have a conversation with applicant
- Communicate the status of the application to volunteer applicant
- Continue to communicate with approved 4-H volunteers to complete *4-H Enrollment* annually

Applicant, please retain *Information for Volunteer Applicants* (2 pages) for your 4-H records.

Revised July 31, 2017

M. Lesmeister, P. Rose, P. Craven

Reviewed by D. Hart, S. Carlson, W. Hein, K. Herber, C. Sponseller, L. Walker, T. White, S. Withee

Oregon State University Extension Service offers educational programs, activities, and materials without discrimination based on age, color, disability, familial or parental status, gender identity or expression, genetic information, marital status, national origin, political beliefs, race, religion, reprisal, sex, sexual orientation, veteran's status, or because all or a part of an individual's income is derived from any public assistance program. Oregon State University Extension Service is an AA/EOE/Veterans/Disabled.



Extension Office Use ONLY:

Criminal History Checks cannot be performed unless the information requested below is provided.

Incomplete forms will be returned.

OSU Extension Office _____

Program Name _____

Agent / Contact _____

Access Type(s):

Check all that apply

Driving:

YP 24 Mo. Recheck Live Animals Fiscal Minors Protected Info Yes No

Volunteer Information:

A copy of your OFFICIAL photo ID must accompany this release

FULL Legal Name (Last, First, Middle) <input type="checkbox"/> Check here IF 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		City	State
			Zip
If you have not lived at your current address for the last seven (7) years, please complete the following providing seven years of history.			
City _____		State _____	From _____ To _____
City _____		State _____	From _____ To _____
City _____		State _____	From _____ To _____
(Add additional pages as necessary)			
Email Address:		Primary Phone Number:	
I certify and authorize the University or a law enforcement agency to conduct a background investigation as outlined in the Disclosure Notice and Authorization for Background Investigation (see page 2). I am also aware of how to access a summary of my rights under the Fair Credit Reporting Act.			
Volunteer Signature: (Parent/Guardian signature is REQUIRED if Minor)		Current Date:	

Mark correspondence as "Confidential"

Return completed form by one (1) of the methods below only:

Mail:

Oregon State University , OHR
1600 SW Western Suite 175
Corvallis, OR 97333-4085

Fax:

541.737.7771

DISCLOSURE NOTICE 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 OSU STANDARD 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 OSU STANDARD 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 signature on the front of this document, 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 to 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. 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 ; as applicable. 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 Chief Human Resource Officer or designee if they are convicted of a crime relevant to determination of fitness as identified in OSU STANDARD 576-055-0060 while serving in these positions. Incumbents in Youth Programs must have criminal history checks repeated every 2 years.

Reference for Volunteer Applicant Oregon State University

_____ is applying to be a volunteer with the OSU 4-H Youth Development Program, and has given your name as a reference.

OSU asks for your help in selecting well-qualified people to serve in volunteer roles. Please complete and return this reference form as quickly as possible. To the extent allowed by law, information you provide will be treated in a confidential manner.

If you have questions or additional comments, you are welcome to call (name) _____ at the local office (phone number only) _____.

1. How long have you known the applicant? ____ Years / ____ Months
2. What is your relationship to the applicant? _____
3. Please rate the applicant on each of the following qualities:

	Excellent	Good	Fair	Poor	Unknown	Comments
Understands children						
Communication skills						
Personal initiative						
Respect for others						
Positive attitude						
Sense of fairness						
Role model						
Sensitivity						
Flexibility						
Resourcefulness						
Patience						
Dependability						
Ability to complete a task						
Ability to organize						
Enthusiasm						
Sense of humor						

Please share your impressions and knowledge of the applicant's qualifications for a volunteer role, by using specific examples whenever possible.

4. Describe how well the applicant interacts and works with children/youth:

5. Describe how well the applicant interacts and works with adults:

6. How would you describe the applicant's ability to handle records and/or money?

_____ Very good. I would trust this person with my organization's money and financial records.

_____ Fair. The person would do O.K., but would need some help.

_____ Poor. Handling money and financial records is a problem for this person.

More on Side 2...

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More on Side 2...

- 7. What other strengths would this applicant bring to a volunteer role in a program like this?

- 8. What difficulties might this applicant have fulfilling a volunteer role that needs to be focused on positive youth development or safety?

- 9. Describe how effective this applicant might be, when working with people who may have a disability, different values, religion, economic background, culture, or traditions?

- 10. What additional skills, abilities, and attributes does the applicant have that would be helpful in a volunteer position?

- 11. Would you be willing to place your child, or any other child for whom you are responsible, under his/her supervision? ___Yes ___No ___Maybe Comments:

- 12. Do you have any reason(s) why this person should **not** be considered for this position? If yes, please explain:
___ No
___ Yes

- 13. Would you recommend this applicant to be a volunteer in in this program?
() Yes, definitely () Yes () Yes, hesitantly () No Comments:

Reference Name: _____ Phone: _____
Address: _____
 (RR, Str., Apt.) (Town) (State) (Zip)
E-Mail: _____
Signature: _____ Date: _____

Thank you for helping identify volunteers to approve for OSU programs.

Return Volunteer Reference Form by mail, drop-off or email:

OSU Extension Lincoln County
Attention: Todd Williver
1211 SE Bay Blvd.
Newport, OR 97365
Todd.Williver@oregonstate.edu

For Office Use:

Date received: _____
Reviewed By: _____

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- 12. Do you have any reason(s) why this person should **not** be considered for this position? If yes, please explain:
 No
 Yes

- 13. Would you recommend this applicant to be a volunteer in in this program?
 Yes, definitely Yes Yes, hesitantly No Comments:

Reference Name: _____ Phone: _____

Address: _____
(RR, Str., Apt.) (Town) (State) (Zip)

E-Mail: _____

Signature: _____ Date: _____

Thank you for helping identify volunteers to approve for OSU programs.

Return Volunteer Reference Form by mail, drop-off or email:

OSU Extension Lincoln County
Attention: Todd Williver
1211 SE Bay Blvd.
Newport, OR 97365
Todd.Williver@oregonstate.edu

For Office Use:

Date received: _____
Reviewed By: _____