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A Component of a Volunteer Management System

Thank you for giving your leadership to the Kansas 4-H Youth Development Program.

Volunteers are fundamental to the 4-H program. The Kansas 4-H Strategic Plan calls for volunteers to focus on the five Kansas 4-H Life Skills which represent those enduring qualities that help young people become confident, capable, caring and responsible citizens. They are:

- a positive self-concept
- an inquiring mind
- a concern for the community
- healthy interpersonal relationships
- sound decision making

Kansas 4-H Volunteer Information Profile (VIP)

A **volunteer** is a non-paid representative of the Extension Unit for which they provide services.

A **registered volunteer** is a volunteer who has completed the full Volunteer Information Profile process including: application, screening and orientation and has been appointed by the appropriate Extension Unit Board.

Steps to complete the Volunteer Information Profile:

1. Fill in all sections, providing information as requested. Your signature is required on page 4. If you are under the age of 18, your parent/guardian's signature is also required.

2. Return the VIP Application Form in a sealed envelope marked, "Confidential" to the local Extension Unit Office.

3. If you do not have a volunteer role selected, complete the VIP Interest Matching Form available from the local Extension Office and return it to the office.

4. The Extension Unit VIP Review Committee (VIPRC) will

review your VIP application and forward their recommendation to the Extension Unit Board. Before your appointment as a Registered 4-H Volunteer you will need to complete a volunteer orientation session.

5. If needed, the 4-H Club Parent's Committee/Organizational Leader and/or the local 4-H Program Development Committee will match your interests and skills with the needs of the program using the VIP Interest Matching Form (see item 3 above). Upon appointment and placement, you will receive a copy of the respective job description along with other relevant information which will support your efforts for a successful and positive experience as a 4-H volunteer.

To the extent authorized and allowed by law, this application form and its contents will be kept confidential and accessible only to Extension personnel and members of the local 4-H VIP Review Committee.

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Kansas State University Agricultural Experiment Station and Cooperative Extension Service

4-H 673 rev

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Please complete in ink.

Answers given by the applicant may be verified.

I. GENERAL INFORMATION

Name						
(FIRST)	(MIDDLE INITIAI	L)	(LAS	ST)		
Mailing Address			(0)	(3)		(717)
(STREET, BOX,	. ,		(CITY)	(8	TATE)	(ZIP)
Physical Address (If different than mailing address) (ST		E, APT#)	(CITY)	(S	TATE)	(ZIP)
How long have you been at this pr	resent address?	Years				
If less than 5 years, list your prior	addresses and the le	ength of time	you lived at each.			
(STREET, ROUTE, BOX, APT #)		(CITY)	(STATE)	(ZIP)	(LEI	NGTH OF STAY)
(STREET, ROUTE, BOX, APT #)		(CITY)	(STATE)	(ZIP)	(LEI	NGTH OF STAY)
Phone: Home	Work	ī		Cell		
E-mail:			FA	X:		
Are you a 4-H alumnus?	🗖 No	□ Yes Wh	ere?			
(The following will be used for r Gender First, check one Then, check all that app	Ethnicity:	 Female Hispanic White Asian 	e 🗆 🗅 I 🗆 Black	Male Non-Hispanic Indian/Alaska I	Native	
Previous Volunteer Experience (L	ist current or most r	ecent experie	ence first)			
ORGANIZATION		VOLUNTEE	R ROLE		YEA	R(S)
ORGANIZATION		VOLUNTEE	R ROLE		YEA	R(S)
VOLUNTEER INTEREST						
□ Check here if you do not have matching you to an available volu Extension Office.					-	
What is your 4-H volunteer intere	st?					
Do you wish to serve as a volunte	er for an existing clu	ub, activity of	r group?	es 🗖	No	
If yes, name of club/activity/group	p:					
Describe your skills, abilities, hol	bies, training, educa	ational backg	round, etc.			
Do you prefer to work directly wi If you prefer to work with youth v under 7 ages 7–9	what age level(s) do		adults 🗆 be	oth	rence	

II. PERSONAL INFORMATION

Kansas 4-H is very concerned that volunteers be appropriate role models for youth participants. Please complete all questions. A "yes" does not automatically exclude you from becoming a registered volunteer.

Have you ever had any problems with: (Check all that apply)					
a. substance abuse, alcohol, tobacco or other drugs?	🗖 No	□ Yes	If Yes,	□ Charged	
b. criminal behavior? Felony or Misdemeanor?	🗖 No	□ Yes	If Yes,	□ Charged	
c. child abuse or neglect?	🗖 No	□ Yes	If Yes,	□ Charged	
Have you ever been asked to resign a volunteer position?	🗖 No	□ Yes			
Have you ever had your driver's license suspended or revoked? If yes to any of the above, please elaborate:		□ Yes			

Please describe and state what steps you have taken to correct the problem:

Please add additional pages as necessary.

Other than the above, is there any other fact or circumstance involving you or your background that would affect your ability to be a volunteer entrusted with the supervision, guidance and care of youth under the age of 19?

🗖 No	The Yes					
(If yes, please explain):						
Is your driver's license cu	rrent and valid?	🗖 No	The Yes			
Do you currently have vel	nicle insurance coverage	e as required by th	e State of Kansas?	🗖 No	The Yes	
Date of Birth:		Driv	ver's License Number	:		

REFERENCES

List three adults who are familiar with your character and your qualifications as it relates to working with youth. (**Do not list family members or Extension staff.**) Please include complete mailing address and e-mail address. References will be contacted. Information received from references will not be accessible to applicants.

(NAME)	(PHONE: DAY & NIGHT)	(ASSOCIATION TO YOU)
STREET, ROUTE, BOX, APT#)	(CITY)	(STATE) (ZIP)
-mail address		
)		
(NAME)	(PHONE: DAY & NIGHT)	(ASSOCIATION TO YOU)
(STREET, ROUTE, BOX, APT#)	(CITY)	(STATE) (ZIP)
-mail address		
3		
(NAME)	(PHONE: DAY & NIGHT)	(ASSOCIATION TO YOU)
STREET, ROUTE, BOX, APT#)	(CITY)	(STATE) (ZIP)
e-mail address		

SIGNATURE	REQUIRED	ON BACK » »
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VOLUNTEER CODE OF ETHICS

Youth Protection Policy

The mission of Kansas 4-H Youth Development is "Kansas 4-H Youth Development uses unique strategies and opportunities to engage youth in reaching their full potential through partnerships with caring adults".

Volunteers are key to fulfilling this mission. This policy outlines expectations of all those who work with children and youth. These statements represent a code of ethics which all volunteers and paid staff are expected to observe.

As a Kansas 4-H Volunteer, I will:

- 1. Treat youth with respect, caring and acceptance. I know that all young people have skills and talents which can be used to help others and improve their community.
- 2. Honor my volunteer commitment. I will strive to live up to my volunteer time commitment by working the hours needed to fulfill the role I have accepted.
- 3. Keep records, distribute materials and support the 4-H system. I will distribute 4-H materials to youth and adults, keep the required records and turn them in on time.
- 4. Follow established guidelines for keeping financial records and handling 4-H funds.
- 5. Seek training for my volunteer role. I will participate in meetings, self study, or other training programs which will help me work more effectively with young people and adults.
- 6. Make all reasonable efforts to assure equal access to participation for all youth and adults, regardless of race, creed, color, sex, national origin, age, or disability.
- 7. Provide a safe environment. I will not harm youth or adults in any way, whether through sexual harassment, physical force, verbal or mental abuse, neglect, or other harmful experiences.
- 8. Not use alcohol or any illegal substances (or be under its influences) while working with or being responsible for youth, or allow youth to do so while under my supervision.
- 9. Operate machinery, vehicles, and other equipment in a safe and responsible manner. When operating a motor vehicle, I will have a valid driver's license and the legally required insurance coverage.
- 10. Role-model the character traits of trustworthiness, respect, responsibility, fairness, caring and citizenship. Model the core values of K-State Research and Extension: INTEGRITY, to develop and deliver credible information; COMMUNICATION, to provide common understanding; SCHOLARSHIP, to foster life long learning; LEADERSHIP, to serve as an agent of change; INCLUSION, to foster active participation by all.
- 11. Promote and practice the responsible and ethical stewardship of livestock and/or companion animal projects.
- 12. Obey the laws of the locality, state and nation.
- 13. Work as a "team player" for the good of the 4-H Program. I will work cooperatively with youth, other volunteers and extension staff and treat them with respect .
- 14. Work within the 4-H program. As a 4-H volunteer, I am accountable to the local club, the appropriate Extension Unit, the Kansas 4-H Youth Development Program, K-State Research and Extension, and Kansas State University for my actions.

I understand that:

- a. The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning my qualifications. I further waive the right to ever view, inquire into or learn the substance and/or content of any reference given by any individual with regard to any aspect of this application. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the 4-H Club, local Extension Unit, Kansas State University, and the officers, employees, and volunteers thereof with respect to such information.
- b. In signing this application, I have read the attached information and apply for registration with the local Extension Unit and the Kansas 4-H Youth Development Program. I affirm that the information I have given on this form is true and correct. I agree to comply with the policies, rules and regulations of the 4-H Youth Development program and local Extension Unit. I have read and agree to abide by the Kansas 4-H Volunteer Code of Ethics. I agree to complete an orientation.

c. As a 4-H Volunteer I serve at the request of the local Extension Unit and may be removed from service at its discretion. I may resign my volunteer role at any time at my discretion.

Signature	_ Date
Parental Signature (if under age 18)	Date

Upon Completion, Return this Form in a Sealed Envelope Marked "Confidential" to the Local Extension Unit Office