



North Carolina 4-H Youth 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 currently a 4-H member? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of club? _____ County _____ State _____
Have you ever enrolled in 4-H in another county or state? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where? 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 _____ _____

EDUCATIONAL BACKGROUND

Name of last school attended or currently attending.	State	County
Name of last High School attended or currently attending.	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	Grade currently enrolled or highest completed. 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

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EMPLOYMENT AND VOLUNTEER EXPERIENCE

(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

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: _____

If volunteer is a minor (under the age of 18): Parent/Guardian Signature: _____ Date: _____

For Office Use Only	
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 _____	

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North Carolina 4-H Youth 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		
<input type="checkbox"/> Hispanic or Latino Ethnicity &		
OR		
<input type="checkbox"/> Not Hispanic or Latino &		
<input type="checkbox"/> White (only)	<input type="checkbox"/> White (only)	
<input type="checkbox"/> Black or African American (only)	<input type="checkbox"/> Black or African American (only)	
<input type="checkbox"/> American Indian or Alaska Native (only)	<input type="checkbox"/> American Indian or Alaska Native (only)	
<input type="checkbox"/> Asian (only)	<input type="checkbox"/> Asian (only)	
<input type="checkbox"/> Native Hawaiian or Pacific Island (only)	<input type="checkbox"/> Native Hawaiian or Pacific Island (only)	
<input type="checkbox"/> White & Black	<input type="checkbox"/> White & Black	
<input type="checkbox"/> White & American Indian or Alaska Native	<input type="checkbox"/> White & American Indian or Alaska Native	
<input type="checkbox"/> Black & American Indian or Alaska Native	<input type="checkbox"/> Black & American Indian or Alaska Native	
<input type="checkbox"/> Black & Asian	<input type="checkbox"/> Black & Asian	
<input type="checkbox"/> Balance (other combinations)	<input type="checkbox"/> Balance (other combinations)	

Prepared by: Harriett C. Edwards, Ed.D