



Fremont County Extension Office
 6655 State Hwy 115
 Florence, CO 81226
 Office: 719.276.7390 Fax: 719.276.7397
 E-Mail: Kassundra.tracy@fremontco.com
 Online Enrollment: www.https://colorado.4honline.com

Club Name: _____

Full Legal Name _____
 (please print) First (Nickname) Middle Initial Last

Address _____
 Street Address and PO Box City Zip

Years as 4-H Leader _____ **Birth Date** _____ **Gender:** Male Female

Cell Phone (____) _____ **Home Phone** (____) _____ **Work Phone** (____) _____

E-mail (required) _____

Residence (check one) Farm Rural/10,000 Town/10 - 50,000 Suburb/50,000 City/50,000

Ethnicity (check one) Hispanic Not Hispanic

Race (check one) White Black or African American Alaskan/Am Indian Asian Hawaiian/ Pac. Island Prefer Not to State

Gender (check one) Male Female Other/Unidentified

List any special accommodation for a disability to participate in this program. _____

Volunteer Positions (check all that apply)

- Organizational Leader Co-Organizational Leader Club Project Leader County Project Leader Event Coordinator
 Chaperon Other _____ Member of a 4-H Board(s) Please List _____

Projects: Must List Projects You Lead or Assist With

Project Name	Project Unit # if Applicable	Check if curriculum is needed	For Office Use Only
		<input type="checkbox"/> Yes	
		<input type="checkbox"/> Yes	
		<input type="checkbox"/> Yes	
		<input type="checkbox"/> Yes	
		<input type="checkbox"/> Yes	
		<input type="checkbox"/> Yes	

List any special training, interests, education, skills or certifications you are willing to share with the 4-H program: _____

Emergency Contact Information

Name _____ Cell Phone _____

Email _____

4-H Enrollment Year 2023-2024

COLORADO 4-H CODE OF CONDUCT

4-H is the informal youth education program of Cooperative Extension through Colorado State University.

Through 4-H projects and programs, youth learn life skills, citizenship, communication and decision making techniques, leadership, interpersonal relations, community and global awareness. 4-H helps youth form attitudes

that will enable them to become self-directing, productive, and contributing members of society.

Youth learn from their experience. Part of their experience is observing and modeling their behavior after adults they know and respect. To contribute in a positive way to youth development Colorado 4-H Leaders, Volunteers,

Parents and other adults will:

- Conduct themselves in a mature, courteous and respectful manner, use appropriate language, exhibit honesty,
- good sportsmanship and act as a positive role model.
- Provide a safe learning environment, free of physical abuse, mental abuse, ethnic, racial and sexual harassment
- or exploitation of the 4-H member.
- Learn and live by the principles of the 4-H Pledge, 4-H Motto and 4-H Slogan.
- Adhere to all program rules, policies and guidelines including the State 4-H Dress Code and use of the 4-H Clover.
- When transporting 4-H members, have a valid Colorado driver's license and insurance as prescribed by Colorado law
- and maintain the vehicle so that it is safe and reliable for the conditions, weather, and distance for which it will be driven.
- Abstain from the use of alcohol, marijuana, and illegal drugs while participating in 4-H events/programs. These are not
- allowed at any 4-H sponsored program, event and/or activity where youth are present. Leaders should limit their tobacco

- use to areas where youth are not present. This applies to local club meetings, county, district, state, and national events.
- Respect the rights and authority of leaders, parents and Extension Agents.
- Refrain from physical or verbal abuse.
- Apply rules of safety to individuals, groups, and property.
- Accept personal responsibility for behavior.

Conduct not in keeping with 4-H Youth Development standards will not be tolerated. Violation of items listed above will result

in consequences to the participant. Law enforcement may be called and illegal behaviors may result in citations or arrest.

Consequences may include removal, at the individuals' expense and without refund, from participation in the event;

restitution or repayment of damages; sanctions on participation in future local, state, regional or national 4-H events;

and forfeiture of financial support for this event.

It is the responsibility of all program participants to reinforce the code of conduct and report violations and any concerns

to Extension 4-H staff.

4-H Leaders and volunteers serve at the request of Colorado State University Extension. That request can be withdrawn for

violations to this code, other reasons or no reason at any time.

I agree with the above statement

Manager Name Certifying Paper Consent *required*

Acknowledgement of Volunteer Legal Status

I understand I serve at the request of the Colorado State University Extension 4-H Program. The request can be withdrawn for any reason, or no reason, at any time.

I agree with the above statement

Manager Name Certifying Paper Consent *required*

Photo Release

PLEASE INDICATE BELOW PERMISSION TO USE YOUR PHOTOGRAPH FOR PROMOTIONAL EFFORTS

Colorado State University Extension would like to share the positive results of youth/volunteer participation in Extension and 4-H Youth Development events. However, in some cases, you may want to deny this publicity. If you **DO NOT** want your picture used for certain promotional efforts, select the appropriate *option* and *sign below*.

I APPROVE that CSU Extension and 4-H Youth Development can use my picture to be used for promotional efforts.

I DO NOT APPROVE for CSU Extension and 4-H Youth Development can use my picture to be used for promotional efforts.

Manager Name Certifying Paper Consent *required*

Adult Participant Release

Read this document completely before signing. Its effect is to release Colorado State University, its governing board, and the state of Colorado from any liability resulting from your participation in the activities described below, and to waive all claims for damages or losses against the university which may arise from such activities even if they result from negligence.

Note: This document does not cancel or negatively impact liability protection for volunteers. Our CSU Extension volunteers are protected from claims of liability as long they are functioning within the scope of their responsibilities as an authorized volunteer. The document also does not negatively affect any supplemental health or accident insurance that may be given to volunteers through their county program policy. This form is simply to acknowledge that there is risk related to your own participation in this/these events.

RELEASE FROM RESPONSIBILITY, ASSUMPTION OF RISK, AND WAIVER

DESCRIPTION OF ACTIVITIES: *The specific risks vary from one activity to another, but the risks range from minor injuries such as scratches, bruises, and sprains; to major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, exposure to COVID-19, concussions; and catastrophic injuries including paralysis and death. Additionally, there are both foreseeable and unforeseeable risks of injury or death that may occur as a result of traveling to or from Extension activities that cannot be specifically listed.*

I, the undersigned participant, exercising my own free choice to participate voluntarily in the activities described above, and promising to take due care during such participation, hereby acknowledge that I have been informed of the nature of the activities and that I am aware of the hazards and risks which may be associated with my participation in the above- named activities, including the risks of bodily injury, death or damage to property which may occur from known or unknown causes. I understand, accept, and assume all such hazards and risks, and, along with my successors, estate, and assigns, forever waive all claims against the State of Colorado, The Board of Governors of the Colorado State University System, and Colorado State University, its employees, agents, volunteers,

and other persons as set forth above. I understand that I am solely responsible for any costs arising out of any bodily injury or property damage that I may sustain through my participation in normal or unusual acts associated with the above-named activities, regardless of whose fault may be the cause of my injuries or damages, EVEN IF CAUSED BY CARELESSNESS OR NEGLIGENCE.

Further, I hereby indemnify and hold harmless The Board of Governors of the Colorado State University System and Colorado State University, and their members, officers, agents, employees, and any other persons or entities acting on their behalf, and the successors and assigns for any and all of the aforementioned persons and entities, against any and all claims, demands, and causes of action whatsoever, whether presently known or unknown, of any person who suffers any injury, disability, death or other harm, to person or property or both, as a result of my negligent acts or omissions arising out of my participation in and/or presence at the above listed activities.

- I have had sufficient time to review and seek explanation of the provisions contained above, have carefully read them, understand them fully, and agree to be bound by them.
- After careful deliberation, I voluntarily give my consent and agree to this Release from Responsibility, Assumption of Risk, and Waiver.

Manager Name Certifying Paper Consent *required*

Adult Volunteer Annual Appointment Agreement

Colorado 4-H Policy and Procedures - 4-H Year 2023 - 2024

Agreement:

We appreciate your commitment to share your knowledge and talent with county 4-H youth and hope this experience will be fulfilling during the time you serve as a 4-H volunteer. Your satisfaction and progress in this position are important and therefore subject to periodic reviews.

Please read the following expectations and indicate your agreement to cooperate by signing at the end of the form.

- I understand that 4-H volunteer leaders receive their authorization to function as a volunteer from the Colorado State University Extension 4-H Youth Development Program through the county Extension office and local Extension staff.
- I understand that I serve at the request of the Colorado State University Extension Program. The request can be withdrawn for any reason, or no reason, at any time.

The Colorado 4-H Youth Development Program agrees to:

- Provide overall leadership and guidance to the County 4-H program.
- Share philosophy, mission, and goals of the 4-H Youth Development Program.
- Provide a volunteer position description outlining specific duties.
- Provide assistance, support, supervision and periodic evaluation.
- Provide information and training on state and federal 4-H policies and procedures.
- Provide ongoing training and materials.
- Recognize volunteers for their contributions to the 4-H program.
- Follow guidelines for volunteer status review process and uphold CSU Principles of Community.
- Provide training related to protection of minors and creating safe environments.
- Ensure that volunteer applicants complete the application process including the CSU background check prior to beginning volunteering.
- Uphold the Colorado 4-H Code of Conduct.

As a 4-H Volunteer, I agree to:

- Report to and work under the guidance of the Extension agents.
- Work cooperatively with Extension staff, volunteers, parents and members to support and promote the 4-H Youth Development Program.
- Perform the duties in my position description in a responsible and timely manner.
- Accept supervision and support from county and state 4-H staff.
- Abide by state and federal policies and procedures and inform county 4-H staff of any incidents which may violate 4-H policies.
- Participate in training as appropriate and according to county and state requirements.
- Work with the 4-H staff to resolve problems and uphold CSU Principles of Community.
- Report abuse according to the CSU Protection of Minor's policy.
- Inform county 4-H staff of any criminal or motor vehicle violations that I incur after my volunteer approval.
- Follow the Colorado 4-H Code of Conduct which I have read and agree to uphold.

- I understand that volunteering is a privilege, not a right.
- I have read, understand and agree to the expectations outlined in this agreement and the Colorado 4-H Code of Conduct. I understand that I may terminate this appointment without prior notice.
- I understand that if I fail to adhere to the Appointment Agreement or the Colorado 4-H Code of conduct, I will be subject to disciplinary action.
- I understand and agree that any action on my part that contradicts any portion of this agreement is grounds for the immediate suspension and/or termination of my volunteer status with the Colorado 4-H Youth Development Program.

Colorado State University

Principles of Community

The Principles of Community support the Colorado State University mission and vision of access, research, teaching, service and engagement. A collaborative and vibrant community is a foundation for learning, critical inquiry, and discovery. Therefore, each member of the CSU community has a responsibility to uphold these principles when engaging with one another and acting on behalf of the University.

Inclusion: We create and nurture inclusive environments and welcome, value and affirm all members of our community, including their various identities, skills, ideas, talents and contributions.

Integrity: We are accountable for our actions and will act ethically and honestly in all our interactions.

Respect: We honor the inherent dignity of all people within an environment where we are committed to freedom of expression, critical discourse, and the advancement of knowledge.

Service: We are responsible, individually and collectively, to give of our time, talents, and resources to promote the well-being of each other and the development of our local, regional, and global communities.

Social Justice: We have the right to be treated and the responsibility to treat others with fairness and equity, the duty to challenge prejudice, and to uphold the laws, policies and procedures that promote justice in all respects.

January 2016 (last revised date)

I agree with the statement

Manager Name Certifying Paper Consent *required*



FREMONT COUNTY
COLORADO STATE UNIVERSITY
EXTENSION

Fremont County Extension Office
 6655 State Hwy 115
 Florence, CO 81226
 Office: 719-276-7390 Fax: 719-276-7397
 E-Mail: Kassundra.tracy@fremontco.com

4-H Volunteer Screening Application

Name: _____
First (Legal Name) Last (Legal Name) Middle (Legal Name)

Present Address: _____
Street City State Zip

E-Mail Address (required) _____

Phone Numbers (Include area code): Home (____) _____ Cell: (____) _____ Birth date: _____
(mm/dd/yyyy)

Current Employer: _____ Work Phone: _____ Ext. _____

Occupation: _____ Years at this employment: _____

Business Address: _____
Street City State Zip

Are you a 4-H alumnus? Yes ___ No ___ Have you ever been a 4-H Volunteer? Yes ___ No ___ If yes, how many years? _____ Where were you a 4-H Volunteer? _____

Previous 4-H Experience: (Org/Role, Years) _____

Type of Volunteer position you are interested in:

Organizational Leader ___ Co-Organizational Leader ___ Project Leader ___
 Cloverbud Leader ___ Chaperone ___ Resource Leader ___
 Other (please be specific) _____

What age group do you prefer to work with?

age 5-7 _____ 14 and above _____
 age 8-10 _____ adults _____
 age 11-13 _____

When are you available to do an interview? _____

Why are you interested in a 4-H volunteer position? _____

Are you applying to work with an existing 4-H Club? If so, what is the club name? _____

What experience do you have working with youth? _____

Do you have any special training, interests, education, skills? _____

What projects are you interested in leading? _____

Previous residences Information:

Address City State Zip

References *Note: 2 Positive References are required. Please list 3 people who are familiar with your character as it relates to working with youth. **(Do not include family members.)** References should have known you for at least two (2) years. Each will be contacted by email and asked to respond to a short questionnaire. All responses will be confidential. Please print the information.

Name	Email Address	Phone Number (include area code)

Additional information:

Do you illegally use drugs? _____

Have you ever been convicted of a criminal offense? (If yes, explain) _____

Have you ever been convicted of child neglect or abuse? _____

Has your driver's license ever been suspended or revoked? (If yes, explain) _____

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? (If yes, explain)

I understand that the information that I have provided may be verified by contacting persons or organizations named in this application, and I hereby release from liability any person or organization that provides information concerning me to the representatives of 4-H Youth Development Extension of my County. In signing this application, I affirm that the information I have given herein is true and correct. If selected as a volunteer, I understand I serve at the request of the Colorado State University Extension Program. That request can be withdrawn for any reason or no reason at any time. Colorado State University conducts background checks on all volunteers. I understand I serve as a volunteer at the request of Colorado State University Extension. A criminal record will not necessarily bar me as a volunteer, but will be considered as it relates to the specifics of the volunteer position for which I have applied. I agree to abide by the 4-H Code of Conduct and to enforce the Code of Conduct with 4-H members I supervise.

Signature: _____ Date: _____