

MISSISSIPPI STATE UNIVERSITY EXTENSION SERVICE 4-H Volunteer Application Packet

Adults who assume volunteer roles within Mississippi State University Extension Service (MSU-ES) have the opportunity for a rewarding experience. It is understood that a volunteer's role is easier to manage when expectations and responsibilities have been outlined and communicated prior to the job assignment. The success of the 4-H youth development program is attributed to its volunteers. A Registered 4-H volunteer is anyone who contributes time, energies, or talents to the 4-H program and is not paid by MSU-ES.

The process to become a Mississippi State University Extension Service 4-H Registered volunteer will consist of three-steps, which includes:

- 1. Fill out a Volunteer Application Packet.
- 2. Must complete a MSU-ES approved background check or provide documentation that an approved background check has been completed.
- 3. Mandatory Training

The Volunteer Application packet (VAP) contains the following documents:

- a. Volunteer Application
- b. Reference Forms (2)
- c. Volunteer Expectations

- d. Volunteer Position Acceptance Form
- e. A copy of Background Check Form

The volunteer's signature is required on the Application, the Position Acceptance Form and the Volunteer Expectation Form.

A Registered 4-H Volunteer is a volunteer who has completed the full Volunteer Application screening process including: application, screening, and training and has been approved by the MSU-ES County Extension Agent and appointed by the appropriate MSU-ES Associate Director for Youth Development. To the extent authorized and allowed by law, this application form and its contents will be kept confidential and accessible only to appropriate MSU personnel and administrators.

Mississippi State University Extension Services will:

- Educate volunteers to the 4-H program's mission, purpose, goals as they relate to positive youth development.
- Provide direction for Mississippi Extension State University Extension Service 4-H programs.
- Provide instructional materials and resources to be used for educational programming.
- Provide educational programs and materials to develop a volunteer understanding of youth development.

- Provide job descriptions for county volunteer leadership roles.
- Provide support and encouragement to all volunteers.
- Give recognition for time and energy devoted to 4-H Youth Development.
- Inform volunteers of events and activities via Extension newsletters, website and correspondence.
- Maintain working relationships with volunteers and parents involved in the 4-H program.
- Provide a conducive and positive learning environment for 4-H youth, volunteers, parents and other supporters.

Mississippi State University Extension Service Box 9641 • Mississippi State, MS 39762-9641 • Phone (662) 325-3350 • Fax (662) 325-5207

Mississippi State University Extension Service Expectations For 4-H Volunteers

Trust is placed in the Mississippi State University Extension Service to provide quality leadership and care for individuals participating in Extension programs. The opportunity to work with youth is a privileged position of trust that should be held only by those who are willing to demonstrate behaviors that fulfill this trust. These expectations for volunteers guide their involvement in Mississippi State University Extension Service activities and programs.

The purpose of these expectations for volunteers is to ensure the safety and well-being of all participants (i.e., youth, their parents and families, paid and volunteer staff). Mississippi State University Extension Service volunteers are expected to function within the guidelines of Mississippi State University Extension Service 4-H.

The following statements relate to the role of a volunteer with Mississippi State University Extension Service and represent a contractual agreement between a volunteer and Mississippi State University Extension Service.

- As a 4-H volunteer who will have contact with youth audiences, I agree to undergo a mandatory background check.
- I will represent Mississippi State University Extension Service to youth and adults by conducting myself with courteous manners and language, exhibiting good sportsmanship, serving as a positive role model, and demonstrating appropriate conflict resolution skills.
- I will abide by all applicable laws and MSUES rules, policies, and guidelines. This includes, but is not limited to, child protection policies, fiscal management procedures and substance abuse policies.
- I will participate in volunteer training at the county level annually. I will work to improve my volunteer skills by participating in training conferences such as north or south Mississippi Forum, Annual 4-H Volunteer Conference and other opportunities.
- I will not consume or allow 4-H youth to use alcohol or illegal drugs at any MSUES function.
- I will, when transporting others, operate vehicles and equipment in a safe and reliable manner and only with a valid operator's license. I will comply with all vehicular regulations and laws. All passengers will be secured by properly operating seat belts. I have the minimum vehicle insurance coverage required by the state of Mississippi.
- I will accept the responsibility to promote and support the vision, mission, and values of Mississippi State University Extension Service and its programs.
- I will conduct myself in a manner that is in the best interest of youth, adults, and MSUES and will not use the volunteer position for purposes of personal gain.
- I will treat animals in a humane manner and teach program participants to provide appropriate animal care and management.
- I will use technology (including social media) in an appropriate manner that reflects the best practices in youth development.
- I will not practice, condone, tolerate or allow bullying, hazing, harassment or malicious pranks.
- I will ensure that educational programs of Mississippi State University Extension Service shall serve all people regardless of race, color, religion, sex, national origin age, disability, veteran status, sexual orientation, or group orientation.
- I will work with the local Extension staff to plan quality educational programs in my county.
- I understand and accept that Mississippi State University Extension Service has the right to remove me as a 4-H Volunteer with or without cause.

I have read, understand and accept these expectations for volunteers. I understand that suspension or termination of my position will result if I do not meet these expectations.



Mississippi State University Extension Service Volunteer Application

Mississippi State University Extension Service takes seriously its obligation to provide a safe environment for all persons involved in volunteer activities. This application will gather information necessary to successfully match the applicant with the appropriate position. When questions arise about qualifications, answers given by the application will be verified. All 4-H volunteers who have contact with youth audiences must undergo a mandatory background check.

I. GENERAL INFORMATION

Title:		Mr.	Mrs.	Ms.	Dr.	(optional	1)
Name:							
E-Mail:		First		M.I.		Last	
Phone:	Primary			Mobile			
	Other			Work			
Year of Bi Mailing A							
0		(Street, Box,	Route, Apt #)	(City)	(Sta	ate) (Z	(ip)
Residentia	al Address:	(If different fr	om above)				
		(Street, Box,	Route, Apt #)	(City)	(Sta	ate) (Z	Zip)
How long	have you liv	ved at present a	uddress?		Years		
If less than	n five years,	list your prior	addresses and	the length of time	e you lived at	each.	

(Street, Box, Route, Apt #)	(City)	(State)	(Zip)
(Street, Box, Route, Apt #)	(City)	(State)	(Zip)
(Street, Box, Route, Apt #)	(City)	(State)	(Zip)

Mississippi State University Extension Service

Box 9641 • Mississippi State, MS 39762-9641 • Phone (662) 325-3350 • Fax (662) 325-5207

The purpose of the following is only to gather statistics and determine compliance with Civil Rights laws.

 Race/ethnic origin White Black American Indian or Alaskan Native Hispanic Asian or Pacific Island 	Gender: Male Female	Residence: Farm Rural area or town of less than Town or city of 10,000-50,000 City of more than 50,000	
Occupation:		Employer:	
If you were a 4-Her, ind	icate which County:	State:	
If you have volunteered	with youth (including 4-H),	how long did you do this?	
If yes, list City:	County	: Stat	e:
Extension staff with wh	om you worked. Name:	Pho	ne:
II. PERSONAL REFER List two persons, not rel volunteer. If you have pr	RENCES ated to you, who know abo evious experience as a volu	ut your qualifications and experience the with a youth organization, one select address and phone number.	
1) Name	Cell Phone	Work Phone	
Address(Street, Box	, Route, Apt. #) (C	City) (State)	(Zip)
How do you know this	person?	E-mail	
2) Name	Cell Phone	Work Phone	
Address	Doute Aret #	(0)	(7:)
(Street, Box	, Route, Apt. #) (C	City) (State)	(Zip)
How do you know this	person?	E-mail	

I authorize the contact of the references listed above. I understand that the misrepresentation or omission of information requested is just cause for non-appointment/ disengagement as a volunteer.

If accepted as a volunteer, I agree to abide by the rules, policies, procedures and standards of Mississippi State University and to fulfill the volunteer responsibilities to the best of my abilities. I understand that the purpose of 4-H Youth Development programs is to develop youth individually and as responsible and productive citizens. I recognize that 4-H Youth Development programs are part of Mississippi State University Extension Service. As a volunteer, I agree to work with youth regardless of race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, or group affiliation in educational experiences in cooperation with other Extension volunteers and Extension personnel. A 4-H volunteer can only be enrolled in one county.

Applicant:	Date:	
Extension Agent:	Date:	
County Coordinator:	Date:	
State 4-H Coordinator:	Date:	
Associate Director for 4-H:	Date:	

County



4-H Mississippi State University Extension Service Volunteer Reference Form

Applicant's Name			
Reference Name	Phone	()	
Address			
Street	City	State	Zip
Position applying for			
(Provide a written volunteer position d position description if done by telepho	one.)		-
1. How long have you known the appli			
2. What are the applicant's strengths as Strengths:	nd weaknesses for this pos		
Weaknesses:			
3. Would you be willing to place your individual's care? No Yes			ponsible under this
4. Why do you consider this applicant	to be a positive role mode	l for youth?	
5. In comparison with individuals you areas?	u have known, how woul	d you rate the appl	icant in the following

	Average	Good Outstanding
Emotional maturity		
Leadership		
Enthusiasm and energy		
Self-confidence		
Sense of humor		
Handling emergencies		
Understanding of children		
Communication skills		
Dependability		
Patience		
Ability to work with children		

6. If given the opportunity, would you select this person for this position?

No____Yes ____

Why or why not?

Mississippi State University Extension Service

Box 9641 • Mississippi State, MS 39762-9641 • Phone (662) 325-3350 • Fax (662) 325-5207



4-H Mississippi State University Extension Service Volunteer Reference Form

Applicant's Name			
Reference Name		()	
Address			
Street	City	State	Zip
Position applying for			
(Provide a written volunteer position de position de scription if done by telephor	ne.)		-
1. How long have you known the applic			
2. What are the applicant's strengths an Strengths:	d weaknesses for this po		
Weaknesses:			
3. Would you be willing to place your c individual's care? No Yes	•	-	ponsible under this
4. Why do you consider this applicant t	o be a positive role mod	el for youth?	
5. In comparison with individuals you areas?	have known, how wou	ld you rate the appl	icant in the following

	Average	Good Outstanding
Emotional maturity		
Leadership		
Enthusiasm and energy		
Self-confidence		
Sense of humor		
Handling emergencies		
Understanding of children		
Communication skills		
Dependability		
Patience		
Ability to work with children		

6. If given the opportunity, would you select this person for this position?

No____ Yes ____

Why or why not? _____

Mississippi State University Extension Service

Box 9641 • Mississippi State, MS 39762-9641 • Phone (662) 325-3350 • Fax (662) 325-5207

MISSISSIPPI STATE UNIVERSITY EXTENSION SERVICE 4-H VOLUNTEER POSITION DESCRIPTION

Mississippi (4-H, FCS, ANR, Horticulture) Program Mississippi State University Extension Service The Mississippi State University Division of Agriculture, Forestry and Veterinary Medicine

TIME REQUIRED:

(Estimate the total time required for both preparation and actual volunteer efforts.)

LOCATION:

(Identify where the volunteering will occur.)

GENERAL PURPOSE:

(Identify the overall volunteer responsibilities and expectations, in paragraph form.)

SPECIFIC RESPONSIBILITIES:

(Identify specific duties and responsibilities of the volunteer position in a bulleted list.)

QUALIFICATIONS:

(Identify specific skills and abilities necessary for a volunteer in the specific position to be successful.)

SALARY & BENEFITS: Unsalaried; volunteer.

(Identify all benefits and "perks" which are available through this position.)

Agent: Name:	
Title:	
Address:	
City, State, Zip	
Phone:	
Fax:	
E-mail:	



MISSISSIPPI STATE UNIVERSITY EXTENSION SERVICE 4-H VOLUNTEER POSITION DESCRIPTION ACCEPTANCE FORM

I have read, understand and agree to fulfill the purpose and responsibilities of this volunteer position and further agree to accept guidance and direction from the Mississippi State University Extension Service. I also understand that failure to fulfill the purpose and responsibilities of the volunteer position and to accept guidance and direction from MSU Extension personnel could result in removal from serving as a volunteer. I also understand that this volunteer position is renewable annually; I will notify the local county Extension office if I am no longer interested in serving.

SIGNATURES:

Signature of volunteer

Date

Signature of Agent

Date

Mississippi State University Extension Service Box 9641 • Mississippi State, MS 39762-9641 • Phone (662) 325-3350 • Fax (662) 325-5207

Roles of the County Extension Agent

Extension agents/program associates have the responsibility for oversight of the 4-H Youth Development Program in their assigned counties. This includes the following responsibilities:

- Coordinate the chartering of 4-H membership clubs and other 4-H affiliates (e.g., 4-H Council, volunteer/parent groups, committees, etc.)
- Provide opportunities for all 4-H youth
- Plan and coordinate the county 4-H program
- Staff the 4-H clubs utilizing volunteers with the assistance of youth leaders
- Provide training, supervision, and resources for volunteers/parents and youth leaders
- Explain and enforce 4-H rules and procedures
- Ensure that a quality 4-H educational program is conducted in the county
- Inform 4-H volunteers and members about opportunities at county, district, regional, state, national, and international levels
- Appoint or dismiss 4-H members, 4-H volunteers, and 4-H parents

MISSISSIPPI STATE UNIVERSITY EXTENSIN SERVICE Role of 4-H Volunteers

4-H is a non-formal educational program delivered by volunteers who are supervised by Extension agents/program associates. There are two major roles adults may assume in 4-H:

• Direct Volunteer — "Unpaid support for the 4-H program through face-to-face contact with youth, by a youth, by a youth or adult, e.g.: project leader, club leader, camp counselor, teacher, activity leader, organizational leader, and teen leader." (As defined in Extension Service and Land Grant University Cooperating Extension Service, United States Department of Agriculture ES Form 237 (7/93).

• Indirect Volunteer — "Unpaid support for the 4-H program by adult which does not include face-to-face contact with youth, e.g.: boards, committees." (As defined in Extension Service and Land Grant University Cooperating Extension Service, United States Department of Agriculture ES Form 237 (7/93).