

Hello there!

Thank you for becoming an important part of the Clallam County 4-H Youth Development Program.

Volunteers like you serve as wonderful mentors to the creative, caring, youth citizens in our community! Volunteering in the Clallam County 4-H Youth Development Program requires the following steps be completed in order to ensure the safest environment possible for our youth and volunteers:

- 1. Completion of the following attached forms:
- * "WSU 4-H Youth Development Volunteer Application Part A".
- * WSU requires three personal references. Please share the attached reference forms with three adults who know you well and return the completed forms with your application.

2. Visit Extension.org

- Hint: If this is your first time logging into eXtension Campus, you will need to click the "Continue" button and then "Create a New Account"
- ❖ Instructions are available at 4-H eXtension Volunteer Education
- View Washington State 4-H Volunteer Orientation.
 - > Enrollment key is CLALLAM
 - Print out completion certificate and turn into local 4-H office.
- View Put the Child First Training Presentation
 - > Enrollment key is CLALLAM4H
 - Print out completion certificate and turn into local 4-H office.
- 3. Attend an in-person or zoom live training for new volunteers. Check local extension office for time and dates.
- 4. You will be interviewed by 4-H staff.
- 5. Once the documents are received in the 4-H office you will receive an email invitation from theadvocates@sterlingvolunteers.com requesting you to complete a background check. Please complete within 72 hours. There is no cost to you.
- 6. Enroll on 4-H online.
- All adult volunteers must enroll on 4-H Online every year. You are not considered a certified volunteer without a currently active 4-H Online profile.
- Volunteers who do not have an active enrollment on 4-H Online for two years will need to reapply as a new volunteer.

Feel free to contact me if I can answer any questions about the volunteer process or 4-H in general.

Melanie Greer, 4-H Program Coordinator, WSU Extension Clallam County https://extension.wsu.edu/clallam/4h/ melanie.greer@wsu.edu | 360-417-2398 Office | 360-912-2062 Work Cell 223 E 4th St, STE 15, Port Angeles, WA 98362



WASHINGTON STATE UNIVERSITY 4-H YOUTH DEVELOPMENT VOLUNTEER APPLICATION FORM

(To be completed by all potential volunteers) PART A

| | (First) | (Middle) | (Last) |
|--|--|--|---|
| | (i iiot) | (Madie) | (Labt) |
| Mailing Ad | ldress: | | (2) |
| | (Street) | | (City) (Zip) |
| Length of | time at current address | :: | |
| Phone: | Day: () | Best tim | ne to call: |
| | Eve: () | Best tim | ne to call: |
| Email: | | | |
| Please ch | eck all of the WSU Coc | pperative Extension Programs y | ou're interested in being a part of: |
| 4-H Youth Development Program Club Leader Project Leader Out of School Time Programs Challenge School Enrichment Other (please specify) | | 4-H Project Areas of Interest Clothing & Textiles Environment Equine Expressive Arts Foods & Nutrition Large Animals Mechanical Sciences Plant Sciences Small Animals Social Sciences Technology Other (please specify) | Agricultural & Natural Resources Programs Master Gardeners Beach Watchers Livestock Advisors Other Family & Community Development Programs Food \$ense Clothing & Textile Advisors Food Safety Advisors Other (please specify) |
| What age | level(s) do you prefer v | vorking with: 5-8 9-12 | 13-19 Adult |
| | kills and talents are s y skills you would be | willing to contribute. | e the quality of our programs. Please |
| Photo Graph Grant | ovisual operations ography/videography nic arts writing/fundraising c speaking, teaching ng, editing newsletters | Web page design Carpentry/woodworking Clerical/office skills Food service Accounting, bookkeeping Leadership/management | Nursing/First Aid Research, data collection, experimentation Advocacy Computer skills (list software) |
| Writin | relations, marketing | Facilitation | Other skills: |

Work, Education and Volunteer Experience (please list most current experience first).

| Employer/Organization | Position Title/Volunteer Role | Year(s) |
|-----------------------|-------------------------------|---------|
| | | |
| | | |
| | | |

Media Release

I understand that photos and video/audio recordings of me may be made during 4-H meetings, events and activities that maybe used in whole or in part by WSU Cooperative Extension to promote the 4-H Youth Development Program

Evaluations

I understand that youth and adult participants at 4-H meetings, events and activities may be asked to complete an evaluation. Completion of the evaluations is always optional.

Training

If accepted as a WSU Volunteer in the 4-H Youth Development Program, I agree to complete the basic orientation and training program required of all WSU Cooperative Extension 4-H Volunteers. In addition, I understand that additional training requirements may vary in each county and with specific volunteer positions.

Persons with a disability requiring special accommodation while participating in 4-H may call your local WSU Cooperative Extension office. If accommodation is not requested in advance, we cannot guarantee the availability of accommodation on site.

Cooperative Extension programs and policies are consistent with federal and state laws and regulations.



REFERENCE FORM FOR WASHINGTON STATE UNIVERSITY EXTENSION VOLUNTEER POSITION WORKING DIRECTLY WITH YOUTH (for reference by mail)

| | | | is applying to work wit | th youths in an Extension | program and |
|-------|--|-----------------------|---|--|------------------|
| has g | iven your name as a | reference. | | • | . 0 |
| | | | ve fun while learning new developing into productiv | skills, increasing their abve adults. | oilities to work |
| | ppreciate your promp | | | people to serve in volunt nments will be treated in | |
| How | long and in what cap | pacity or position ha | ave you known the applic | ant? | |
| Pleas | se use this checklist | to evaluate the app | olicant's qualities. Use th | e following marking syste | em: |
| | E – Excellent | G = Good | F = Fair | N = Unknown | |
| | _ Understanding of | children | Dependability | Flexibility | |
| | _ Communication sk | kills | Sense of humor | Patience | |
| | _ Ability to organize | | Sense of fairness | s Initiative | |
| | _ Respect for others | 3 | Enthusiasm | Resourceful | ness |
| | _ Ability to complete | a task | | | |
| | se share your impres fic examples where | | e of the applicant's quali | fications for the position b | by using |
| 1. | . How well does | the applicant inter | act with children? | | |
| | | | | | |
| | | | | | |
| 2. | . How would you | u rate the applicant | s's ability to work in a volu | unteer role with youths? | Other adults? |
| | | | | | |

| 3. | What additional skills, abilities, and attributes does the applicant have that would be helpful in this position? |
|--------------|---|
| 4. | Does the applicant have any experience working with people who are developmentally disabled, from different ethnic backgrounds, from different socioeconomic backgrounds? If so, please describe. |
| 5. | How would you describe the applicant's ability to handle records and/or money? |
| 6. | How would you describe the applicant's general outlook and stability? |
| 7. | Would you be willing to place your child, or any other child for who you are responsible under his/her leadership? Why? |
| 8. | Do you know any reason why this person should NOT be considered for this position? If yes, please explain. |
| Signature | : Date: |
| Return thi | THANK YOU! s form to: (county address) |
| through you | rograms and employment are available to all without discrimination. Evidence of noncompliance may be reported r local Extension office. |
| Date receive | ed 01/06/jbf |



REFERENCE FORM FOR WASHINGTON STATE UNIVERSITY EXTENSION VOLUNTEER POSITION WORKING DIRECTLY WITH YOUTH (for reference by mail)

| | | | is applying to work wit | th youths in an Extension | program and |
|-------|--|-----------------------|---|--|------------------|
| has g | iven your name as a | reference. | | • | . 0 |
| | | | ve fun while learning new developing into productiv | skills, increasing their abve adults. | oilities to work |
| | ppreciate your promp | | | people to serve in volunt nments will be treated in | |
| How | long and in what cap | pacity or position ha | ave you known the applic | ant? | |
| Pleas | se use this checklist | to evaluate the app | olicant's qualities. Use th | e following marking syste | em: |
| | E – Excellent | G = Good | F = Fair | N = Unknown | |
| | _ Understanding of | children | Dependability | Flexibility | |
| | _ Communication sk | kills | Sense of humor | Patience | |
| | _ Ability to organize | | Sense of fairness | s Initiative | |
| | _ Respect for others | 3 | Enthusiasm | Resourceful | ness |
| | _ Ability to complete | a task | | | |
| | se share your impres fic examples where | | e of the applicant's quali | fications for the position b | by using |
| 1. | . How well does | the applicant inter | act with children? | | |
| | | | | | |
| | | | | | |
| 2. | . How would you | u rate the applicant | s's ability to work in a volu | unteer role with youths? | Other adults? |
| | | | | | |

| 3. | What additional skills, abilities, and attributes does the applicant have that would be helpful in this position? |
|--------------|---|
| 4. | Does the applicant have any experience working with people who are developmentally disabled, from different ethnic backgrounds, from different socioeconomic backgrounds? If so, please describe. |
| 5. | How would you describe the applicant's ability to handle records and/or money? |
| 6. | How would you describe the applicant's general outlook and stability? |
| 7. | Would you be willing to place your child, or any other child for who you are responsible under his/her leadership? Why? |
| 8. | Do you know any reason why this person should NOT be considered for this position? If yes, please explain. |
| Signature | : Date: |
| Return thi | THANK YOU! s form to: (county address) |
| through you | rograms and employment are available to all without discrimination. Evidence of noncompliance may be reported r local Extension office. |
| Date receive | ed 01/06/jbf |



REFERENCE FORM FOR WASHINGTON STATE UNIVERSITY EXTENSION VOLUNTEER POSITION WORKING DIRECTLY WITH YOUTH (for reference by mail)

| | | | is applying to work wit | th youths in an Extension | program and |
|-------|--|-----------------------|---|--|------------------|
| has g | iven your name as a | reference. | | • | . 0 |
| | | | ve fun while learning new developing into productiv | skills, increasing their abve adults. | oilities to work |
| | ppreciate your promp | | | people to serve in volunt nments will be treated in | |
| How | long and in what cap | pacity or position ha | ave you known the applic | ant? | |
| Pleas | se use this checklist | to evaluate the app | olicant's qualities. Use th | e following marking syste | em: |
| | E – Excellent | G = Good | F = Fair | N = Unknown | |
| | _ Understanding of | children | Dependability | Flexibility | |
| | _ Communication sk | kills | Sense of humor | Patience | |
| | _ Ability to organize | | Sense of fairness | s Initiative | |
| | _ Respect for others | 3 | Enthusiasm | Resourceful | ness |
| | _ Ability to complete | a task | | | |
| | se share your impres fic examples where | | e of the applicant's quali | fications for the position b | by using |
| 1. | . How well does | the applicant inter | act with children? | | |
| | | | | | |
| | | | | | |
| 2. | . How would you | u rate the applicant | s's ability to work in a volu | unteer role with youths? | Other adults? |
| | | | | | |

| 3. | What additional skills, abilities, and attributes does the applicant have that would be helpful in this position? |
|--------------|---|
| 4. | Does the applicant have any experience working with people who are developmentally disabled, from different ethnic backgrounds, from different socioeconomic backgrounds? If so, please describe. |
| 5. | How would you describe the applicant's ability to handle records and/or money? |
| 6. | How would you describe the applicant's general outlook and stability? |
| 7. | Would you be willing to place your child, or any other child for who you are responsible under his/her leadership? Why? |
| 8. | Do you know any reason why this person should NOT be considered for this position? If yes, please explain. |
| Signature | : Date: |
| Return thi | THANK YOU! s form to: (county address) |
| through you | rograms and employment are available to all without discrimination. Evidence of noncompliance may be reported r local Extension office. |
| Date receive | ed 01/06/jbf |