

Cornell University Cooperative Extension Chautauqua County Volunteer Application

Directions:

- *Type or print, using blue or black ink
- *If you need additional space, attach a separate sheet
- *Sign the completed application

GENERAL			
NAME (Last)	First	Middle	Today's Date
Mailing Address-Street		Daytime Phone #	Evening Phone #
City	State	Zip Code	Email Address
Have you ever volunteered for CCE before? If yes, give dates, program, position			
Volunteer Position: Please check the volunteer role(s) that interest you most.			
<input type="checkbox"/> 4-H Organizational Leader (organizes a county club) <input type="checkbox"/> 4-H Project Leader (teaches projects to youth) <input type="checkbox"/> Advisory Committee Member (serves on a committee for a county wide project) <input type="checkbox"/> General 4-H Volunteer			
What interests do you wish to pursue or what do you hope to accomplish by serving as a CCE volunteer?			
List your previous volunteer/employment experiences (list current or most recent experience first.)			

Are you a 4-H Alumni? _____ County where you were in 4-H? _____			
Have you ever been a 4-H Leader? YES/NO If yes, how many years? _____			
Do you have any special skills or have you had any special training?			

Accommodations: Given the expectations of the volunteer position for which you are applying, describe any physical or health accommodations that may be needed to allow you to participate in the activity.

Transportation: Do you have an independent and reliable means of transportation to and from volunteer activities? _____ Yes _____ No

REFERENCES: List two people, not related to you, that we may contact who have knowledge of your qualifications. Please provide complete address.

Name _____ **Mailing Address** _____ **Daytime Phone #** _____

Have you ever been convicted of a criminal offense other than a minor traffic violation?

_____ No _____ Yes (If yes) Date(s) _____

NOTE: *A criminal record will not necessarily bar an applicant. A criminal record will be considered as it relates to the requirements of the volunteer position for which you have expressed an interest.*

Do you possess a valid NYS Driver's License? _____ Yes _____ No

NOTE: *If the volunteer position you seek requires the transportation of others in your personal vehicle or use of CCE Association vehicles, you will be asked to complete a motor vehicle record request permission form.*

I affirm that the statements made on this application are true. I understand that misrepresentation or omission of facts requested is cause for my non-appointment or removal as a Cornell Cooperative Extension volunteer. I authorize Cornell Cooperative Extension of *Chautauqua* County to obtain from all persons, including those not names here, and/or agencies any records, documents, and other information relative to my suitability to perform the duties of the volunteer position. **I understand, if the volunteer position I see involves unsupervised work with minors, individuals over 65, or individuals with disabilities that a criminal background check including a sexual offender search may be made.** I further release all parties supplying said information from all liability and responsibility arising from their supplying said information.

I understand and agree that the volunteer position at CCE for which I am applying, is without compensation or benefits of any kind. I further understand that the provisions of this application do not constitute a contract (either expressed or implied) of employment between myself and CCE. I further understand that if I am offered and accept a volunteer position at CCE, either I or CCE, may terminate the volunteer relationship at anytime for any reason or for no particular reason or cause. CCE reserves the right to determine and change its policies and procedures applicable to volunteers at any time for any reason. I understand and agree that my volunteer position is contingent upon, among other things, my signing the CCE Association Volunteer Agreement and acceptance of the provisions of the CCE Association Volunteer Code of Conduct.

Signature _____ **Date:** _____