



2449 St Paul Blvd Rochester, NY 14617 t. 585 753 2550 f. 585 753 2560

4-H Volunteer Enrollment/Reenrollment Form

Directions: This form is intended for new and returning 4-H Volunteers in the CCE Monroe County 4-H Program. Complete all sections and return to the address above. You will be contacted with the status of your application when you are approved.

DEMOGRAPHIC INFORMATION

Family Name		Primary Phone Numb	er
Primary Email			
			Zip
Emergency Contact Na	me & Phone		
Ethnicity:Hispar	nicNon-H	ispanic	
Race:White	Black	AsianNativ	e American
Pacific	Islander	Two or more races	Choose not to disclose
Residence (check one):	Farm	_Rural (Under 10K)	Town/city (10K-50K)
Military (check all that a	pply):	No one in my family is serv	ing in the military
I have a parent wh	o served/is serving in	the militaryI have	e served/am serving in the military
Branch Component	Air Force	Army Marin	esNavy
(Check all that apply):	Coast Guard	DOD Civilian	Space Force
Status:	Active-Duty	National Guard	Reserves Retired
Returning Volunte	1 1	UNTEER ROLE /olunteer	
I am interested in voluntee		ganizational Club Leader ivity Leader	4-H Project Leader 4-H Resource leader

Some talents/skills/interests I have that I would love to share with youth include:

Areas I would like to receive additional traini Club Management Clu		Using 4-H Cur	riculum
Specific Topic Areas such as (please	e list interests):		
Other:			
References List 2 people we may contact, not re	NEW VOLUNTEE elated to you, who have		ualifications:
Reference 1:			
Name Address	Email	Phone	7in
Address	City	State	ZIP
Reference 2:			
Name Address	Email	Phone State	
Address	City	State	ZIP
т	RANSPORTATION		
- Do you have an independent reliable means		from volunteer activities	s? ☐Yes ☐No
Do you possess a valid Driver's License?]No	
Note: if the volunteer position you seek requires the transpor asked to complete a motor vehicle record request permission		hicle or use of CCE Association	vehicles, you will be
All volunteers are required to authorize a sci History prior to being accepted for a volunter A criminal record will be considered as it related have expressed an interest. A national crimi enrolled volunteers.	er position. A criminal red ates to the requirements o	ffenders Registry & Nat cord will not necessarily of the volunteer position	/ bar an applicant. n for which you
We conduct screening upon initial applicatio Background Checking Company after your e F			nail from our
By signing this form, I consent and give Couse and/or publish my photograph(s) or in educational purposes, including on its web releases, etc.for promotion of CCE and Codisplay, broadcast, exhibit and market said promotion of commercial or non - commercial purposes at the right to use said photograph for promotion	nage (including audio, filrosite, in newsletters, pub CCE programs/services. In Chotographs, either alone of as CCE or its employees	m, digital image or any olications, marketing nales also grant CCE the rares part of a finished pand agents may detern	y other media) for naterials, press ight to distribute, roduction, for
I understand that I am not being compensar approval over the final product in which it permission or authority from any and all cla shall bind our heirs, guardians, assigns, ar	appears. I hereby release	se CCE and all persor	s acting under its

VOLUNTEER AGREEMENT

We are pleased that you have accepted a volunteer assignment to Cornell Cooperative Extension Association of Monroe County (hereafter referred to as "CCE"). Please accept our sincere thanks for your valuable contribution to CCE.

- 1. I, _____ (print name), agree that as a CCE volunteer my participation in the activities outlined in the attached volunteer position description is without monetary or other compensation.
- 2. I understand CCE shall have the right to suspend or release me as a volunteer at any time and for any reason, within the discretion of CCE,. I also understand that I have the right to terminate the agreement, recognizing that if I received significant training for the volunteer position that there is an expectation of volunteer service.
- 3. I understand that CCE does not provide volunteers with medical insurance therefore CCE is not responsible for any medical expenses incurred by me. Further, I understand that I am neither covered by Worker's Compensation nor entitled to employee benefits as a result of my CCE volunteer affiliation.
- 4. CCE will cover me as a volunteer under the CCE commercial general liability to protect me against any covered claims for injury to persons or damage to property arising out of my activities as a volunteer. In exchange for volunteer liability insurance protection, I, on behalf of myself, my heirs, and my representative do hereby release CCE and the Association, its officers, directors, employees, and other volunteers from any liability whatsoever for any injury to myself, including death, or damage to my property that arises out of or is in any way related to my volunteer activities unless my injury is the result of the sole negligence of CCE or the Association. I understand that the liability insurance coverage only applies when I am on duty, acting in accordance with CCE guidelines for my volunteer assignment and all other applicable pre-conditions for coverage under the CCE insurance policy are met.
- 5. CCE agrees to provide the orientation, training, supervision, and support deemed necessary by CCE for the successful fulfillment of my volunteer responsibilities.
- 6. I am aware of the terms and condition of this agreement and agree that the provision of this agreement does not constitute a contract, either expressed or implied for employment between CCE and myself.
- 7. Background checks will be repeated on a regular basis; every year for the NYS Sex Offenders' Registry, every 3 years for the Criminal History File check and the MVR check. The Volunteer Agreement and Code of Conduct will be reviewed every 3 years.
- 8. I fully support the following statement: "Cornell Cooperative Extension provides equal program and employment opportunities."
- 9. This agreement is valid until it is terminated by CCE or me.

NYS 4-H CODE OF CONDUCT

Our first priority is to create a safe, inclusive space for learning, sharing, and collaboration welcoming to people from diverse backgrounds, cultures and perspectives. Diversity includes, but is not limited to: race, color, religion, political beliefs, national or ethnic origin, immigration status, sex, gender, gender identity and expression, transgender status, sexual orientation, age, marital or family status, educationallevel, learning style, physical appearance, body size, protected veterans, and individuals with disabilities. CCE actively supports equal educational and employment opportunities. No person shall be denied admission to any educational program or activity on the basis of any legally prohibited discrimination.

CCE is committed to the maintenance of affirmative action programs that will assure the continuation of such equality of opportunity.

All 4-H Participants—youth, families, volunteers, and Extension staff—in or attending any activity or event sponsored by Cornell University's Cornell Cooperative Extension (CCE) 4-H Youth Development Program are required to uphold the values of the NYS 4-H program and conduct themselves according to these standards. The standards also apply to online activity, including social media internet presence.

Ground Rules

The following Ground Rules apply to all 4-H participants and volunteers. In addition to these expectations, CCE volunteers are accountable to additional expectations outlined in the CCE Volunteer Code of Conduct. Extension staff is accountable to additional standards of professionalism that are outlined by position descriptions and CCE human resource policies.

1. **Create a Welcoming Environment for All**. Encourage everyone to fully participate in CCE and 4-H. Recognize that all people have skills and talents that can help others and improve the community. Though we will not always agree, we must disagree respectfully. When we disagree, try to understand why.

- 2. **Bring Your Best Self.** Respect and follow Cooperative Extension rules, policies, and guidelines that relate to 4-H Youth Programs and Events. Conduct yourself in a manner that reflects honesty, integrity, self-control, and self-direction. Accept the results and outcomes of 4-H contests with graceand empathy for other participants. Accept the final opinions of judges and evaluators. Be open to new ideas, suggestions, and opinions of others.
- 3. **Obey the Law.** Commit no illegal acts. Do not possess or use illegal drugs, tobacco products, firearms, weapons, or any harmful object with the intent to hurt others at any time. (Firearms are allowed only as part of supervised 4-H Shooting Sports programming.) Do not attend CCE or 4-H activities under the influence of alcohol or controlled substances.
- 4. **Honor Diversity Yours and Others'.** Respect and uphold the rights and dignity of all staff, volunteers, families, and youth who participate in CCE and 4-H programs.
- 5. **Create a Safe Environment.** Do not carelessly or intentionally harm youth or adults in any way (verbally, mentally, physically, or emotionally). Refrain from romantic displays and sexual activities either in public or private situations. Be kind and compassionate towards others. Do not insult or putdown other participants. Harassment, bullying, and other exclusionary behavior aren't acceptable. Be considerate and courteous of all youth and adults and their property.
 - a. Youth must stay in the designated dormitory lodging areas: boys may not be in girls' dormitory or lodging areas and girls may not be in boys' dormitory or lodging areas.
 - b. Report any and all accidents, physical or verbal abuse or unsafe conditions that threaten the emotional or physical well-being of others or yourself to the NYS 4-H, Extension staff, and Event Coordinators as soon as possible.
- 6. **Be a Team Player.** Work cooperatively with Extension staff, volunteers, 4-Hers, and all involved in4-H programs and activities. Be responsive to the reasonable requests of the person in charge. Respect the integrity of the group and the group's decisions.
- 7. **Participate Fully.** Participate in all of the planned programs, be on time and follow through on assigned tasks/responsibilities (including the completion of required records or reports) in a mannerthat insures the safety, well-being, and quality of the educational experience for self and others. Have fun!
- 8. **Watch What You Wear.** Use your best judgment. Wear clothing suited for the activity you will participate in. Clothing promoting alcohol and other intoxicants, or displaying messages that are racist, sexist, homophobic, or any other degrading message that detrimentally impacts the dignity and respect of members of our community are never acceptable. Don't wear revealing clothing, such as short skirts or shorts, midriff-baring tops, and sagging pants. If you are unsure about what isappropriate, contact the local CCE 4-H Educator in charge in advance.
- 9. **Be a Positive Role Model.** Act in a mature, responsible manner, recognizing you are role models for others, and that you are representing yourself, CCE, and the 4-H Youth Development Program. Be responsible for your behavior, use positive and affirming language, and uphold exemplary standardsof conduct at all 4-H activities.

Consequences

Any of the following may be used, depending on severity of the situation:

- 1. Participant will receive a verbal warning.
- 2. Participant may remain at the event/activity but may possibly be barred from a future event.
- 3. Participant may be asked to leave the event/activity. If a youth, the parent(s) will be called and the youth will be sent home at family's expense.

CCE VOLUNTEER CODE OF CONDUCT

CCE volunteers are required to accept and adhere to the following standards of behavior when engaged in assigned volunteer activities:

- Respect and adhere to CCE rules, policies, and guidelines that relate to volunteer activity and the program I serve.
- Execute CCE business in an ethical manner.
- Preserve the confidentiality of information (and sign confidentiality agreement if required by my volunteer role) about program participants and CCE internal affairs that have been entrusted to me as affirmed by my signature on the Volunteer Confidentiality Agreement.
- Refrain from using my CCE volunteer status for personal or business financial gain. All funds raised in the name of CCE and/or 4-H are property of CCE.
- Fulfill my assigned volunteer duties, including completion of required records or reports, in a timely manner.
- Use my time wisely and work cooperatively with Extension staff and other volunteers.
- Participate in required training programs and use the recommended policies and procedures.
- Accept supervision and support from professional Extension staff and/or supervisory volunteers.
- Respect and uphold the rights and dignity of all staff, other volunteers and all individuals who participate in CCE programs, recognizing that people's values, beliefs, customs and strengths differ.
- Encourage participation of and respect for individuals of diverse backgrounds, cultures and perspectives.
- Refrain from the use of alcohol, tobacco and inappropriate languages.
- Commit no illegal or abusive act.
- Report all unsafe conditions and accidents to professional Extension staff as soon as possible.
- Dress in a manner that reflects a positive image of Cornell Cooperative Extension.

CCE SEXUAL HARASSMENT PREVENTION TRAINING FOR VOLUNTEERS

The purpose of this training is to set forth a common understanding about what is and what is not acceptable in the CCE environment. All volunteers are expected to:

- 1. Watch the video found here: https://youtu.be/DJ6ya3FGO6s
- 2. Confirm participation and understanding of expectations found here: https://cceconferences.wufoo.com/forms/s1rg2oqq1p1u7cw/
- 3. Forward the email confirmation you receive to Susan Coyle (smc226@cornell.edu)

This training is required yearly and your volunteer enrollment can not be approved until receipt of this.

ACKNOWLEDGEMENT OF RISK

This form must be completed to participate in 4-H clubs and related activities.

I hereby apply for my child to participate in the 4-H club/activity indicated below to be conducted by the designated Cornell Cooperative Extension Association and acknowledge as follows:

I fully understand and acknowledge that there are inherent risks and dangers in my child's participation in the 4-H club and activities and my child's participation in said 4-H club and all its activities and use of any equipment related to such activities may result in injury, illness or death, and damage to personal property. I understand other participant, accident, forces of nature, or other causes may cause these risks and dangers and I hereby accept these risks and dangers.

My child is in good health and is at or above the minimum age of 5 for Cloverbud members and 8 for regular members required to participate in this activity and is able to participate in any strenuous physical activity associated therewith.

CORNELL COOPERATIVE EXTENSION OF MONROE COUNTY

4-H Program Year: October 1, 2023 through September 30, 2024

I have read the above and by signing it I agree it is my intention to have my child participate in the indicated activity and I understand and accept the risks involved. This shall be binding on my heirs, successors, assigns, administrators and executor. Any claim or disputes arising out of my child's participation in the activity shall be venued in the Supreme Court of the State of New York in the county where the County Extension office is location. I am at least twenty-one (21) years of age and I am the legal parent/guardian authorized to sign this document on behalf of the child named herein.

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	J. J.	O	

With my signature, which I voluntarily affix to this document, I acknowledge that the information is accurate to the best of my knowledge, and I have read and understand the terms of all releases, acknowledgements and agreements herein, specifically including parts: PHOTO RELEASE, CODE OF CONDUCT, COVID ASSUMPTION OF RISK & ACKNOWLEDGEMENT OF RISK.

Volunteer Name (PRINT)			
Volunteer Signature		Date:/_ /	
	FOR OFFICE USE ONLY	Y	
DATE RECEIVED	SCREENING SENT TO HR	DATE APPROVED BY HR	
DATE Sexual Harassment Prevent	ion Training Complete	References Checked:	