
# GENERAL INFORMATION



|  |  |  |  |
| --- | --- | --- | --- |
| Last Name | First Name | M.I. | Name You Prefer |
| Mailing Address | How long at this address? |
| City | State | Zip | County |
| If less than a year, previous address | How long have you resided in thecounty? |
| City | State | Zip | Email Address |
| Daytime Phone | Evening Phone | Best Time to Call |

**4-H EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| Are you a 4-H Alumnus?Yes No | If yes, where?City State  | If yes, what year(s) were you a4-Her? |
| Have you ever been a 4-Hvolunteer?Yes No | If yes, where?City County State  |
| Why are you interested in a 4-H Volunteer position? |
| What time commitments are you considering? hrs./week hrs./month | Have you ever worked with youth before? Please explain briefly.Yes No  |

**TRANSPORTATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have access to a car?Yes No | Do you have a validdrivers license?Yes No | Drivers license number and stateDL# State  | Date of Expiration / /  |
| Have you ever received atraffic violation?Yes No | If yes, please explain. |

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U.S. Department of Agriculture, and local governments cooperating.

# EMPLOYMENT AND VOLUNTEER EXPERIENCE

(This information is needed for the past 10 years. Please attach extra pages as necessary.)

|  |  |
| --- | --- |
| Current Occupation/Volunteer Position | Employer/Organization |
| Employer/Organization Address | Employer/Organization Telephone |
| City, State, Zip | Email Address | Employed From/To |
| Previous Occupation/Volunteer Position | Employer/Organization |
| Employer/Organization Address | Employer/Organization Telephone |
| City, State, Zip | Email Address | Employed From/To |
| Previous Occupation/Volunteer Position | Employer/Organization |
| Employer/Organization Address | Employer/Organization Telephone |
| City, State, Zip | Email Address | Employed From/To |

**EDUCATIONAL BACKGROUND**

|  |  |  |
| --- | --- | --- |
| Name of Last High School Attended | State | County |
| Did you graduate?Yes No | Did you receive a GED?Yes No | If not, please circle highest grade completed.1 2 3 4 5 6 7 8 9 10 11 12 GED |
| **Education Beyond High School** (Please begin with current or most recent.) |
| Institution/City/State | Dates AttendedFrom: To: | Degree Month/Year | Major |
| Institution/City/State | Dates AttendedFrom: To: | Degree Month/Year | Major |

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**REFERENCES**

|  |
| --- |
| **Please list three persons, not related to you, who have knowledge of your qualifications and have****known you for at least two years. Please provide complete addresses and phone numbers.** |
| Name | Address, City, State, Zip |
| Telephone NumberDay Evening | Email Address | Relationship |
| Name | Address, City, State, Zip |
| Telephone NumberDay Evening | Email Address | Relationship |
| Name | Address, City, State, Zip |
| Telephone NumberDay Evening | Email Address | Relationship |

I authorize contacting the listed references, previous employers, and volunteer organizations. I understand the omission or misrepresentation of information requested may result in non- appointment or dismissal as a 4-H volunteer. If appointed as a volunteer, I agree to abide by the policies of the North Carolina Cooperative Extension and the North Carolina 4-H Program and to fulfill my volunteer responsibilities to the best of my ability.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant Signature

Date

**For Office Use Only**

The reference check was: Satisfactory Unsatisfactory

Date of reference check:

Name of person conducting the check:

If unsatisfactory, please explain

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This information is requested solely for the purpose of determining compliance with Federal civil rights laws; your response will not affect consideration of your application. 4-H policy prohibits unlawful discrimination based on race, sex, color, creed, religion, national origin, age, disability, or political affiliation.

**DEMOGRAPHIC DATA**

|  |  |  |
| --- | --- | --- |
| Last Name | First Name | M.I. |
| Maiden Name | Gend | erMale | Female | Date of Birth / / Month Day Year |
| Ethnic Group**Hispanic or Latino Ethnicity &**White (only)Black or African American (only) American Indian or Alaska Native (only) Asian (only)Native Hawaiian or Pacific Island (only) White & BlackWhite & American Indian or Alaska Native Black & American Indian or Alaska Native Black & AsianBalance (other combinations) | **OR** | **Not Hispanic or Latino &**White (only)Black or African American (only) American Indian or Alaska Native (only) Asian (only)Native Hawaiian or Pacific Island (only) White & BlackWhite & American Indian or Alaska Native Black & American Indian or Alaska Native Black & AsianBalance (other combinations) |

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# BACKGROUND SCREENING CONSENT

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name | First Name | M.I. | \*Social Security Number |
| Current Address | Since when? | Date of Birth/ / |
| City | State | Zip | County |
| Home Phone | Drivers licenses number and stateDL# State | Date of Expiration/ / |

**List below previous residence(s) (city, state, zip) and any alias, maiden, or other names for the past seven years. (Please begin with the most recent address.)**

|  |  |
| --- | --- |
| Previous address | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |
| Prior Address | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |
| Prior Address | How long at this address? |
| City | State | Zip | Alias, Maiden, or Other Names |

##### Have you ever been convicted of a misdemeanor or felony other than a misdemeanor traffic violation?

Yes No

If yes, please give date, nature, county/state, and disposition of offense. (Information should include any situation in which the applicant was sentenced for a crime,

unless the sentence was reversed on appeal. A criminal record will not necessarily prevent an

applicant from becoming a 4-H volunteer, but rather will be considered as it relates to specifics of the volunteer position for which you are applying.)

I hereby authorize the 4-H agent or authorized representative of the organization bearing this application to obtain and release any information pertaining to my background for the sole use of obtaining a criminal and traffic violation background check. I give my consent to a criminal and traffic violation background check.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant Signature

Date

\*Social security numbers are collected for the sole purpose of conducting background clearances. Providing the information is optional, however, for those positions that require criminal background checks, this information is necessary for program participation.

**For Office Use Only**

The criminal background check was: Satisfactory Unsatisfactory

Date of background check:

Name of person conducting the check:

If unsatisfactory, please explain

*Prepared by: Harriett C. Edwards, Ed.D*