# New Mexico State University
# 4-H Youth Development
# Volunteer Application Form

(To be completed by all *potential* volunteers)

**For County Extension Office Use Only**

Date entered _____

Fee Paid ☐ Check ☐ Money Order ☐ Cash

Date_____ ☐ Accepted ☐ Declined ☐ More info needed

Date of Notification Letter _____

Name:_____
(First) (Middle) (Last)

Mailing Address: _____
(Street) (City) (Zip)

Length of time at current address:_____ (If less than 2 years, please provide previous address below)

_____
(Address) (Length of time)

Phone: Day:_____ Best time to call:_____
Eve:_____ Best time to call:_____
Cell:_____ Best time to call:_____

Email:_____

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

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

_____

_____

_____

**Background Disclosure**

Answer YES of NO to each listed item. If the answer is YES to any item, explain in the area provided, indicate the charge or finding, the date and the court(s) involved.

1. Convicted of a felony. ☐ Yes ☐ No **IF YES, EXPLAIN BELOW**

_____

_____

2. Convicted of crimes relating to financial exploitation. ☐ Yes ☐ No **IF YES, EXPLAIN BELOW**

_____

_____

3. Convicted of crimes related to drugs and/or alcohol, including driving under the influence. ☐ Yes ☐ No **IF YES, EXPLAIN BELOW**

_____

_____

4. Convicted of any crime against children or other persons. ☐ Yes ☐ No **IF YES, EXPLAIN BELOW**

_____

_____

**I understand a background check will be completed prior to final consideration of my application to volunteer and that volunteering is a privilege and not a right. I understand that *misrepresentation or omission of required information* is just cause for non-appointment as a volunteer with New Mexico State University Cooperative Extension Service and that *failure to communicate any change in status related to the above questions* to the County Extension Office will result in immediate removal as a 4-H volunteer leader. I understand that I serve at the pleasure of New Mexico State University Cooperative Extension Service and agree to abide by the policies of the New Mexico State University Cooperative Extension Service 4-H Youth Development Program and to fulfill the volunteer responsibilities to the best of my ability.**

**Applicant Signature:**_____ **Date:** _____

Please return this application and the Disclosure and Consent Form at your earliest convenience to your local County Extension Office. Contact us if you have any questions or wish further information. Thank you!

**Sept 2006**