

MSU Extension Volunteer Application Form

Extension volunteers working with youth aged 19 and under and/or with adults who have severe mental, physical or emotional disabilities must complete this application.

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

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

Telephone: (_____) _____ (_____) _____
(Home) (Work)

Do you have a valid driver's license? ____ Yes ____ No

Do you have a valid automobile insurance policy? ____ Yes ____ No

Why do you want to be an MSU Extension volunteer? _____

Describe briefly your volunteer experience, work you have done with youth, vulnerable adults and community groups, and training you've received.

List your interests and skills (for example, drama, food and nutrition, computers, photography, health/safety/wellness, animal science, horticulture, leadership, group process skills, citizenship, natural resources, marine and water resources, community service, career development). Feel free to list any and all others!

I prefer: ____ working with youth: ____ aged 5 to 8 ____ aged 9 to 12 ____ aged 13 to 19
____ working with adults with disabilities ____ youth with disabilities

How much time are you willing to spend as an MSU Extension volunteer?

Weekly _____ hours Monthly _____ hours

List three references. Include business associates, employers or social friends. (Do not list relatives.)
Be sure you include persons who can provide information about your qualifications and suitability for working as a volunteer with MSU Extension programs.

1. _____

Name Address

Telephone: (_____) _____ (_____) _____
(Home) (Work)

2. _____

Name Address

Telephone: (_____) _____ (_____) _____
(Home) (Work)

3. _____

Name Address

Telephone: (_____) _____ (_____) _____
(Home) (Work)

Have you ever been turned down as a volunteer with another organization?

_____ No _____ Yes — If yes, please explain: _____

Have you applied to become a volunteer (or have you volunteered) in another county or state in 4-H, another youth organization or any other organizations? _____ No _____ Yes

If yes, please explain: _____

I understand that my enrollment as a volunteer is contingent upon successful completion of the application process. I give my permission for the above-named references to release information about me and for my criminal history to be verified.

I understand that MSU Extension does not discriminate on the basis of race, color, national origin, sex, disability, age, religion, disability, political beliefs, sexual orientation, marital status or family status, and that this application will be handled in a confidential manner.

I agree to serve as a volunteer for Michigan State University Extension. I understand that either party may cancel this relationship at any time.

I certify that the above information is correct. I agree to inform MSU of any changes.

Signature _____ Date _____

Return this form to:

Thank you for your willingness to share your talents!

MSU is an affirmative action, equal-opportunity employer. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran status.