

**COLORADO STATE UNIVERSITY DENVER EXTENSION  
4-H LEADER APPLICATION**

**Please type or print with black ink.** Be sure to complete all the information requested. You will be contacted to schedule an appointment for an interview prior to acceptance. If more space is needed, please attach an extra sheet of paper.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

How long at current address? \_\_\_\_\_ How long at previous address? \_\_\_\_\_

Home Phone:(     ) \_\_\_\_\_ Work Phone:(     ) \_\_\_\_\_ Other:(     ) \_\_\_\_\_

Present Employment or Occupation: \_\_\_\_\_

Number of Children: \_\_\_\_\_ Ages: \_\_\_\_\_

1.) Please explain why you want to be a 4-H volunteer leader: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2.) What project areas interest you? *e.g. model rockets, photography, sewing, gardening, etc.* Please explain why: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3.) List special skills, training, interests or hobbies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4.) Have you ever been involved with other volunteer programs working with youth? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5.) a. \_\_\_\_\_ I will be working with the \_\_\_\_\_ 4-H Club.

b. \_\_\_\_\_ I will be starting a 4-H Club in \_\_\_\_\_ (location or area).

6.) Check types of leadership roles that interest you.

\_\_\_\_\_ 4-H Club Leader \_\_\_\_\_ Assistant 4-H Club Leader \_\_\_\_\_ Project Leader \_\_\_\_\_ Special Activity Volunteer

\_\_\_\_ Other (please describe *e.g. Team Leader*) \_\_\_\_\_

7.) What do you expect from your involvement as a 4-H leader? \_\_\_\_\_

8.) Does your current car insurance coverage meet or exceed Colorado's minimum insurance standards? \_\_\_\_ Yes \_\_\_\_ No

**Would you be willing to drive your car to transport youth as part of your volunteer work?**

\_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Uncertain

9.) Please list three references, not related to you, who are familiar with your ability to work with youth:

**Name                      Mailing Address                      City   State   Zip   Daytime Phone**

1. \_\_\_\_\_ (      ) \_\_\_\_\_

2. \_\_\_\_\_ (      ) \_\_\_\_\_

3. \_\_\_\_\_ (      ) \_\_\_\_\_

10.) **Please respond:**

a. Have you ever been convicted of a drug or criminal offense? \_\_\_\_ Yes \_\_\_\_ No (if yes, please explain)

\_\_\_\_\_

c. Have you ever been charged with child neglect or abuse? \_\_\_\_ Yes \_\_\_\_ No

d. Has your driver's license ever been suspended or revoked? \_\_\_\_ Yes \_\_\_\_ No (if yes, please explain)

\_\_\_\_\_

e. Other than the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people?  
\_\_\_\_ Yes \_\_\_\_ No (if yes, please explain)

\_\_\_\_\_

The information I have provided may be verified by contacting persons or organizations named in this application, and I hereby release from liability any person or organization that provides information concerning me to the representatives of the 4-H Youth Programs Office of Denver. Signing this application, I affirm that the information I have given herein is true and correct. I understand and accept that CSU Denver Extension will conduct a background check through appropriate channels. If I am accepted to participate as a volunteer 4-H leader, I will work to the best of my ability with the 4-H office to make this a positive experience for the youth, their parents and with the Denver Extension Office. I agree to abide by the philosophies of 4-H.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

|                   |                                                                                                     |                                                                                                                                                         |
|-------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Return to:</b> | <b>CSU Denver Extension/4-H</b><br>888 East Iliff Ave.<br>Denver, CO 80210<br>Phone: (720) 913-5270 | <b>When this application is received, it will be processed.</b><br><b>If accepted a background check is required.</b><br><br><b>Fax: (720) 913-5289</b> |
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