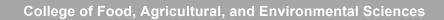


Good Natured Garden Partners Volunteer Application

. GENERAL IN	IFORMATI	ON							
Email:									
Full Name:					Preferred Name:				
Date of Birth (MI	M/DD/YY):								
Mailing Address	:								
City/State/Zip:									
County of Resid	ence:								
Primary Phone:					Secondary Phone:				
Length of time at this address (years):									
Please circle th	e appropri	ate respon	se in ead	ch line					
Gender	Male	Female		nder Identity Not ted	Prefer not to	state			
Residence	Farm	Town/Rural (<10,000)		wn/City ,000-50,000)	Suburb (< 50,000)		City (> 50,0	00)	
Ethnicity:	Hispanic	Non-Hispan	nic Pre	efer not to state					
Race:	White	Black/Africa American		erican Indian skan Native	Hawaiian Pacific Island	er	Balance (other combinations)		
					Asian		Prefer not to	state	
II. EMERGENO	CY CONTA	CT							
Full Name:				Relat	tionship to Applic	cant:			
Contact Phone:				Cont	act Email:				
III. VOLUNTEE	R TYPE								
Please List Gard	len Name:								
riodoo Elot Gara	ion ramo.								
IV. OTHER INF	ORMATIO	N							
Military Service: I am serving in the Military No one in my family is currently serving I have family member(s) serving in the Military									
Branch of Service (circle)	e /	Air Force	Army	Coast Guard	Marines	Navy	DOD Civilian	Not applicable	
Branch Compon (circle)	ent /	Active	Guard	Reserves	Not applicable				









VII.	PH	OT	O	RFI	F	ΔSF

VII. PHOTO RELEASE	
Photo Release: Permission to use photographic form for promotion contingent upon completing volunt Ohio State University Extension would like to share the positive results of youth and volunteer participation in Expouth Development events. However, in some cases, volunteers may prefer not to permit such publicity. The Omay publish in print, electronic, or video formats the likeness or image of me/my child. I release all claims again respect to copyright ownership and publication including any claim for compensation related to use of the mater YES, I do give permission NO, I do not give permission	xtension and 4-H whio State University has the University with
IX. WAIVER	
Volunteer Waiver, Release, Hold Harmless, and Indemnification Agreement	
I hereby apply to participate as a volunteer in programs conducted in cooperation with Ohio State Extension of the Ohio State University, and I acknowledge as follows: I fully understand and ack there are inherent risks and dangers in my participation in volunteer activities and my participation and use of any equipment or materials related to such activities and my participation may result and/or damage to my personal property. I understand other participants, accidents, forces of na causes may cause these risks and I hereby accept these risks.	knowledge that on in said activities in injury or illness
In consideration of such acknowledgment, I/we do hereby agree to release, discharge, and hold State University Extension, The Ohio State University, its trustees, officers, agents, and employ causes, liabilities, damages, claims, or demands whatsoever on account of any injury or accider participation as a volunteer in Ohio 4-H Youth Development program throughout the dates of my	ees of and from all nt arising out of my
I have read this release before signing below, and I fully understand the contents, meaning, and release. I understand that I am free to address any specific questions regarding this release by questions prior to signing, and I agree that my failure to do so will be interpreted as a complete terms of this release.	submitting those
Applicant Signature:	Dato
Applicant Signature:	Date:







VOLUNTEER STANDARDS OF BEHAVIOR

These Standards of Behavior are accepted by volunteers who commit to an Ohio State University Extension ("OSUE" or "Extension") program as a condition of their volunteer status. The Standards of Behavior shall guide volunteer's behavior during their involvement in Extension programs. Just as it is a privilege for Ohio State University to work with individuals who volunteer their time and energies to the organization, a volunteer's involvement with OSUE is a privilege and a responsibility, not a right.

OSUE provides quality educational programs accessible to all Ohio citizens. The primary purpose of this Standard of Behavior is to ensure the safety and well-being of all Extension program participants (i.e., members, their parents and families, professionals, and volunteers). Volunteers are expected to function within the guidelines of OSUE and the individual program area (4-H, Agricultural & Natural Resources, Family & Consumer Sciences, and Community Development). Extension volunteers shall act with personal integrity.

Ohio State University Extension volunteers will:

- Uphold volunteerism as an effective way to meet the needs of youth and adults.
- Uphold each individual's right to dignity, self-development, and self-direction.
- Accept supervision and support from professional Extension staff while involved in the program.
- Accept the responsibility to represent their individual county Extension program and The Ohio State University.
- Conduct themselves in a courteous and respectful manner, exhibit good sportsmanship, and provide
 positive role models for all youth.
- Respect, adhere to, and enforce the rules, policies, and guidelines established by their individual county Extension program and OSUE.
- Not engage in abusive behaviors that physically or verbally threaten or harm any Extension program
 participant, including youth.
- Not possess or consume intoxicating substances including drugs or alcohol while responsible for the care, custody or control of youth participants.
- Not engage in any act prohibited by law.
- Comply with all civil rights laws and policies, including but not limited to OSUE equal opportunity, antidiscrimination laws, program participant policy.
- Perform duties in a responsible and timely manner as outlined in the position description.
- Immediately report any threats to the volunteer's emotional or physical well-being to the county Extension professional.
- Accept the responsibility to promote and support Extension programs in order to develop an effective county, state, and national program.
- Handle animals and operate machinery, vehicles, and other equipment in a responsible manner.

I understand and agree that as a volunteer:

- In accordance with Ohio State University policy, Self-Disclosure of Criminal Convictions Policy 4.17, Iam required to self-disclose criminal convictions within three business days of the conviction.
- I will follow Ohio State University Institutional Data Policy, which specifies requirements for protecting institutional data, including but not limited to youth member and volunteer personal data.
- I will uphold and support the responsible and lawful use of social media. In so doing, I will not create or post social media content that is abusive, threatening, defamatory, obscene, harassing, or creates a hostile environment.
- I will report any child abuse, sexual abuse, or neglect in accordance with university policy.
- I will not intentionally or purposefully place myself in a position alone with a member of a vulnerable population, in a one-on-one situation, including, but not limited to sleeping quarters with participants.
- I will not, under any circumstances, physically, verbally, or emotionally abuse or fail to provide the basic necessities of care, such as food or shelter to participants.
- I will endeavor to provide a safe and healthy program/camp experience for all participants.
- My volunteer status is subject to immediate suspension or termination based on any act or omission that
 Extension determines to be contrary to any portion of these standards or otherwise in conflict with the goals of
 OSUE.

I have read, understand, and agree to be bound by the VOLUNTEER STANDARDS OF BEHAVIOR outlined above.

Volunteer Signature:	Date:



