

Please list three references. Include business associates, employers or social friends. Be sure you include persons who can provide information about your qualifications and suitability for working as a volunteer with youth programs. ***Make sure that all addresses are complete.***

Do not list relatives. Please inform references that their name is being used.

1. _____
Name Address City Zip
Telephone: (_____) _____ (_____) _____
(Home) (Alternative)

2. _____
Name Address City Zip
Telephone: (_____) _____ (_____) _____
(Home) (Alternative)

3. _____
Name Address City Zip
Telephone: (_____) _____ (_____) _____
(Home) (Alternative)

Have you ever been turned down as a volunteer with a youth-serving organization? Check yes or no.

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

Have you volunteered in other counties within Michigan or in other states? If so, please identify them for us.

Other Michigan counties: _____, _____, _____

Other states (and counties): _____, _____, _____

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, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran 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: MSUE 4-H, 21885 Dunham Rd. – Suite 12, Clinton Twp, 48036

Thank you for your willingness to share your talents with young people!



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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. Michigan State University, U.S. Department of Agriculture and the Macomb County Board of Commissioners cooperating. MSU is an affirmative action/equal opportunity institution.

MACOMB COUNTY MSU EXTENSION CRIMINAL HISTORY CHECK FORM

To protect your privacy, this form will be seen only by Michigan State University Extension Staff. Please return the completed form in the enclosed confidential envelope.

Last Name First Name Middle Initial

Race: ____ White ____ Black ____ Asian or Pacific Islander ____ American Indian or Alaskan Native
____ Other/Unknown

Sex: ____ Male ____ Female Date of Birth: _____

Michigan Driver's License Number: _____

Other Last Name Other First Name Other Middle Initial

Other Last Name Other First Name Other Middle Initial

Other Last Name Other First Name Other Middle Initial

Have you ever been convicted of a felony or a misdemeanor? ____ No ____ Yes

If yes, please explain: _____

I give Michigan State University Extension permission to check my criminal history with state and local police as well as with any jurisdictions in other states in which I have lived.

Signature

Date

NOTE: A criminal record will not necessarily disqualify an applicant. A criminal record is one piece of information that will be considered in determining the appropriateness of an individual to be an MSU Extension volunteer.



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