

Dear Potential Ohio 4-H Volunteer,

Let me take this opportunity to thank you for expressing an interest in becoming an Ohio 4-H volunteer. Each year thousands of adult and teen volunteers contribute their time, energies, and talents that enable Ohio State University to engage young people to become caring, capable, and contributing citizens.

All individuals who are interested in volunteering with Ohio State University Extension and working with a member of a vulnerable population (minors, elderly over age 65, or individuals with disabilities) must complete a selection process under the direction of an Extension professional.

Ohio State University Extension has a policy concerning the selection of individuals who desire volunteering for the organization in a long-term and/or higher risk position. While the actual order of implementation may vary from county to county, all potential volunteers will: (1) receive a position description; (2) complete an application and return to Extension office; (3) have references collected by Extension professionals; (4) complete an interview; (5) submit to a criminal history fingerprint record check; (6) agree to and sign the volunteer standards of behavior form; and (7) participate in an orientation program.

Civilian background checks using a web check system can be obtained at two locations in Clark County. If you have not lived in Ohio for at least five years, you will have to submit to both a BCI and FBI check. Both BCI and FBI background checks can be done at the following locations in Clark County. **The Attorney General's office has advised OSU Legal you are to use the reason code 2151.86.**

- **Clark County Licensing Bureau (south), 1221 Sunset Ave., Springfield, OH 45505, phone: 937-328-5166, Mondays - Friday, 7:30 AM to 6 PM, Saturdays, 7:30 AM – 2 PM.** May pay with a check or cash. BCI - \$40, FBI - \$40, Both - \$80
- **Clark County Sheriff's Department East District Office, 3130 E. Main St. (St. Rt. 40) in Springfield, phone: 937-521-2114, 8 AM to 3:30 PM, Monday through Friday.** Only accept a cashier's check, certified check, or money order. BCI - \$35, FBI- \$35, Both - \$70
- **Clark County ESC, 4170 Alum Ct., Springfield, OH 45505, phone: 937-325-7671, Monday-Friday, 8 AM to 4 PM, Must call ahead to make appointment.** May pay with cash, check, or card. BCI - \$30, \$30 – FBI, Both - \$60
- **Greenon School District, 120 S. Xenia St., Enon, OH 45323, Enter the front doors of Enon Primary, 937- 864-1202, Ext. 1000 Call to schedule appointment, Monday-Friday, 8 AM to 3 PM, May pay with cash or check - BCI-\$33, FBI - \$33, Both - \$66**

Please keep your background check receipt! We will notify you the process for being reimbursed for your background check as part of your volunteer acceptance letter, if you are accepted as a 4-H volunteer.

The results of your criminal background check MUST be sent directly by BCI to: Attention: Background Check – Clark County, OSU Office of Human Resources, 1590 N. High St., Suite. 300, Columbus, OH 43201, Phone: 614-292-3595. You may contact BCI to check on the status of your background check by calling 1-877-224-0043.

Please know that all information related to the selection process may be updated periodically and will be kept in a secured file cabinet. This information will be kept on file for a minimum of three years following the receipt of your materials or the completion of your involvement as an Ohio 4-H volunteer (whichever is longest). The release of information will follow The Ohio State University and OSU Extension operating procedures and will be in accordance with Ohio law.

Working with individuals in your community can bring you immense satisfaction as you help them grow, learn, develop, and succeed. Additionally, volunteering provides you an opportunity to gain new skills, help others, and meet new friends. We hope that you recognize the tremendous benefits of volunteering and will join us in helping ensure that everyone involved has a positive, educational experience.

We appreciate your cooperation and look forward to potentially working with you.

Sincerely yours,



Patty House
Extension Educator
4-H Youth Development
house.18@osu.edu



Kirk Bloir
State Leader
4-H Youth Development
bloir.1@osu.edu

Last update: 11/2023

Ohio 4-H Volunteer Application

I. GENERAL INFORMATION

Email: _____

Full Name: _____

Preferred Name: _____

Date of Birth (MM/DD/YY): _____

Mailing Address: _____

City/State/Zip: _____

County of Residence: _____

Primary Phone: _____

Secondary Phone: _____

Length of time at this address (years): _____

Please circle the appropriate response in each line

Gender	Male	Female	Gender Identity Not Listed	Prefer not to state	
Residence	Farm	Town/Rural (<10,000)	Town/City (10,000-50,000)	Suburb (< 50,000)	City (> 50,000)
Ethnicity:	Hispanic	Non-Hispanic	Prefer not to state		
Race:	White	Black/African American	American Indian Alaskan Native	Hawaiian Pacific Islander	Balance (other combinations)
				Asian	Prefer not to state

II. EMERGENCY CONTACT

Full Name: _____

Relationship to Member: _____

Contact Phone: _____

Contact Email: _____

III. VOLUNTEER TYPE

Please circle the appropriate response

Program Volunteer (committee)	Please List Committee:	
Camp Volunteer	Circle Role: Adult Volunteer or Camp Nurse	
Club Volunteer - Circle specific role to the right	Cloverbud Leader	Project Leader - teaching specific project skill
	Organizational Club Leader	Resource Volunteer - coordinates club activities
Project Volunteer	County project leader – shooting sports or other specialized projects	

List the 4-H Club you wish to apply to serve with.

4-H Club Name: _____



IV. OTHER INFORMATION

Military Service: _____ I am serving in the Military _____ My Son/Daughter serves
 _____ No one in my family is currently serving _____ My Sibling serves
 _____ My Parent serves _____ My Spouse/Partner serves

Branch of Service (circle)	Air Force	Army	Coast Guard	Marines	Navy	DOD Civilian	Not applicable
Branch Component (circle)	Active	Guard	Reserves	Not applicable			

Health Considerations/Notes (e.g., food allergy, diabetes, food allergies, special accommodations needed, etc....)

Are You a 4-H Alumni: _____ YES _____ NO **State and County:** _____

Why are you interested in volunteering for the Ohio State University Extension 4-H Program?

V. ABOUT YOU

Job Title: _____ **Employer:** _____
Work Phone: _____ **Ext.** _____

Previous Work Experience (list current or most recent experience first):

<i>Employer</i>	<i>Position Title</i>	<i>Years</i>	<i>Contact Name</i>	<i>Contact Phone</i>

Previous Volunteer Experience (list current or most recent experience first):

<i>Organization</i>	<i>Volunteer Role</i>	<i>Years</i>	<i>Contact Name</i>	<i>Contact Phone</i>



VI. REFERENCES *(not related to the applicant)***Reference 1**

Name:		Relationship:	
Mailing Address:		City/State/Zip:	
Email:		Phone:	

Reference 2

Name:		Relationship:	
Mailing Address:		City/State/Zip:	
Email:		Phone:	

Reference 3

Name:		Relationship:	
Mailing Address:		City/State/Zip:	
Email:		Phone:	

VII. PHOTO, VIDEO RELEASE and AUTHORIZATION

Me and/or my child, _____ plans to participate in 2023-2024 4-H programming through Ohio 4-H, taking place in the 2023-2024 4-H program year. I acknowledge that during this programming, I and/or my child may have their image and or voice captured through photo, audio or video recording. For good and valuable consideration, the receipt of which is hereby acknowledged, I irrevocably consent to and authorize The Ohio State University, OSU Extension, Ohio 4-H, 4-H Camping Facility and its affiliates, agents, successors and assigns ("OSU") consent to use the videotape and photographs of me and/or my child, and recordings of his/her voice, conversations, sounds, name, image and likeness, captured during and in connection with me and/or my child's participation in the 2023-2024 4-H program year in all types of media and for all lawful purposes.

I hereby grant all rights to OSU to use the results of such videotaping, photography and recording in perpetuity, throughout the world to: (1) reproduce, distribute, use, and display all or any portion of the Video in any manner and in any medium and for any purpose; and (2) grant others the right to reproduce, distribute, use, and display all or any portion of the Video in any manner and in any medium and for any purpose.

I further agree that OSU may use and permit others to use my and/or my child's name, voice, image, and likeness captured during this activity in any medium and in the promotion, advertising, sale, publicizing OSU and Ohio 4-H throughout the world, an unlimited number of times in perpetuity. I hereby waive any right of inspection or approval of the use of my and/or my child's voice, conversation, sounds, image and likeness. I acknowledge that OSU will rely on this grant of rights and hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the rights granted hereunder.

I acknowledge and agree that this agreement is binding on all of my heirs and assigns.

- ☐ YES, I do give permission
- ☐ NO, I do not give permission



VIII. SCREENING QUESTIONS-Part A

Do you currently hold a valid Driver's License?	YES	NO
Do you have current vehicle liability insurance?	YES	NO
Do you intend to use your personal vehicle for 4-H Volunteer work, including personal transportation to and from 4-H events?	YES	NO
Have you ever had a background screening prior to now?	YES	NO

VIII. SCREENING QUESTIONS-Part B

<p>*Have you been subject to investigation in connection to, charged with or convicted of crimes that are a sexually oriented offense, the victim(s) was a minor or are considered an offense of violence under Ohio law, including but not limited to:</p> <table border="1"> <tr> <td>abduction,</td> <td>arson,</td> <td>assault,</td> <td>battery,</td> </tr> <tr> <td>burglary,</td> <td>child abuse,</td> <td>domestic violence,</td> <td>endangering children,</td> </tr> <tr> <td>escape,</td> <td>improperly discharging firearm,</td> <td>inciting to violence,</td> <td>intimidation,</td> </tr> <tr> <td>extortion,</td> <td></td> <td></td> <td></td> </tr> <tr> <td>gross sexual imposition,</td> <td>human trafficking,</td> <td>inducing panic,</td> <td>patient abuse,</td> </tr> <tr> <td>kidnapping,</td> <td>menacing,</td> <td>manslaughter,</td> <td>murder,</td> </tr> <tr> <td>rape,</td> <td>robbery,</td> <td>resisting arrest with violence,</td> <td>riot,</td> </tr> <tr> <td>sexual battery,</td> <td>stalking,</td> <td>strangulation,</td> <td>terrorism.</td> </tr> </table>				abduction,	arson,	assault,	battery,	burglary,	child abuse,	domestic violence,	endangering children,	escape,	improperly discharging firearm,	inciting to violence,	intimidation,	extortion,				gross sexual imposition,	human trafficking,	inducing panic,	patient abuse,	kidnapping,	menacing,	manslaughter,	murder,	rape,	robbery,	resisting arrest with violence,	riot,	sexual battery,	stalking,	strangulation,	terrorism.	YES	NO
abduction,	arson,	assault,	battery,																																		
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<p>I understand that if I have questions about this form I should error on the side of disclosing any relevant information and will reach out to my county 4-H professional for assistance. I understand that if I fail to accurately disclose the requested information in this form it may result in an automatic disqualification or termination of my status as a 4-H volunteer.</p>				YES	NO																																

*If Yes, please provide the information below:

Full Name and any other known aliases (e.g. maiden name): _____

The name of the investigating agency/county office that was involved: _____

The Charge(s)/Offense(s): _____

Court: _____ (i.e. Franklin County Common Pleas Court)

Case No: _____ Date of Conviction: _____



*Has any member of your current household been subject to investigation in connection to, charged with or convicted of crimes that are a sexually oriented offense, the victim(s) was a minor or are considered an offense of violence under Ohio law, including but not limited to:

abduction,	arson,	assault,	battery,
burglary,	child abuse,	domestic violence,	endangering children,
escape,	improperly discharging firearm,	inciting to violence,	intimidation,
extortion,			
gross sexual imposition,	human trafficking,	inducing panic,	patient abuse,
kidnapping,	menacing,	manslaughter,	murder,
rape,	robbery,	resisting arrest with violence,	riot,
sexual battery,	stalking,	strangulation,	terrorism.

YES

NO

I understand that if I have questions about this form I should error on the side of disclosing any relevant information and will reach out to my county 4-H professional for assistance. I understand that if I fail to accurately disclose the requested information in this form it may result in an automatic disqualification or termination of my status as a 4-H volunteer.

YES

NO

*If Yes, please provide the information below:

Name of Individual: _____

This individual's relationship to the volunteer applicant _____

The name of the investigating agency/county office that was involved: _____

The Charge(s)/Offense(s): _____

Court: _____ (i.e. Franklin County Common Pleas Court)

Case No: _____ Date of Conviction: _____

I understand that being a volunteer with 4-H is not guaranteed and may depend upon successful completion of the background check and the information disclosed in this form.

YES

NO

I understand that failure to disclose may result in an automatic disqualification or termination of my status as a 4-H volunteer.

YES

NO

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 University Extension of the Ohio State University, and I acknowledge as follows: I fully understand and acknowledge that there are inherent risks and dangers in my participation in volunteer activities and my participation in said activities and use of any equipment or materials related to such activities and my participation may result in injury or illness and/or damage to my personal property. I understand other participants, accidents, forces of nature or other causes may cause these risks and I hereby accept these risks.

In consideration of such acknowledgment, I/we do hereby agree to release, discharge, and hold harmless Ohio State University Extension, The Ohio State University, its trustees, officers, agents, and employees of and from all causes, liabilities, damages, claims, or demands whatsoever on account of any injury or accident arising out of my participation as a volunteer in Ohio 4-H Youth Development program throughout the dates of my volunteer service.

I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions prior to signing, and I agree that my failure to do so will be interpreted as a complete acceptance of the terms of this release.

Applicant Signature: _____

Date: _____



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES



ohio4h.org
CFAES provides research and related educational programs to clientele on a nondiscriminatory basis. For more information:
go.osu.edu/cfaesdiversity.

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 professionally represent the activity/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 The Ohio State University.
- Not engage in abusive behaviors that physically or verbally threaten or harm anyone participating in or attending an Extension program, including youth.
- Not possess or consume intoxicating substances including drugs or alcohol while responsible for the care, custody or control of 4-H participants.
- Refrain from engaging in any criminal conduct. Comply with all applicable civil rights laws and policies, including but not limited to Ohio State equal opportunity, nondiscrimination policies, social media, and 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.
- Do their best to help youth thrive while exploring their ‘sparks’.
- Read and uphold the Youth Privacy Principles located at go.osu.edu/youthprivacy

I understand and agree that as a volunteer:

- I understand that I have an ongoing obligation to self-disclose to OSUE within three business days if I am indicted, pled guilty and/or are convicted of a crime which constitutes an offense of violence under Ohio law (Ohio Revised Code §2901.01(a)(9)).
 - If I have been background checked and have had a break of service for less than 12 months, I will disclose any convictions that occurred during the break within three business days of commencement of participation in youth activities and programs. If the break in service is longer than 12 months, I must be background checked again.
- I will follow Ohio State University Institutional Data Policy, which specifies requirements for protecting institutional data, including but not limited to 4-H member and volunteer personal data.
- I will report any red-flag behaviors, 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 at the OSUE’s sole discretion.

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

Volunteer Signature

Date

4-H Volunteer Criminal History Fingerprint Background Check Procedure

Please take this page with you when you go to have your background check.

You only need to get a BCI check done if you have lived continuously in Ohio for the last 5 years.

If not, you will need to get both a BCI and FBI check done.

Clark County locations for you to get your background check done include:

- Clark County Licensing Bureau (south), 1221 Sunset Ave., Springfield, OH 45505, phone: 937-328-5166, Mondays - Friday, 7:30 AM to 6 PM, Saturdays, 7:30 AM - 2 PM. May pay with a check or cash. BCI - \$40, FBI - \$40, Both - \$80
- Clark County Sheriff's Department East District Office, 3130 E. Main St. (St. Rt. 40) in Springfield, phone: 937-521-2114, 8 AM to 3:30 PM, Monday through Friday. Only accept a cashier's check, certified check, or money order. BCI - \$35, FBI - \$35, Both - \$70
- Clark County ESC, 4170 Alum Ct., Springfield, OH 45505, phone: 937-325-7671, Monday-Friday, 8 AM to 4 PM, Must call ahead to make appointment. May pay with cash, check, or card. BCI - \$30, FBI - \$30, Both - \$60
- Greenon School District, 120 S. Xenia St., Enon, OH 45323, Enter the front doors of Enon Primary, 937- 864-1202, Ext. 1000 Call to schedule appointment, Monday-Friday, 8 AM to 3 PM, May pay with cash or check - BCI-\$33, FBI - \$33, Both - \$66

What You Need to Get Your Ohio 4-H Background Check

1. A government issued photo ID - such as your driver's license - with your current address and shows your birth date.
2. Your Social Security number - Know your number? No need to bring your SS card.
3. If you have not lived in Ohio for the last five consecutive years, you are required to complete both a BCI (Ohio) and FBI (National) background check. **Use the following reason codes:**

BCI Revised Code: 2151.86

FBI Revised Code: 2151.86, Out of Home Child Care

4. **Background check results must be MAILED DIRECTLY from BCI to:**

Attention: Background Check - Clark County

OSU Office of Human Resources, 1590 N. High St., Ste. 300, Columbus, Ohio 43201

614-292-3595

If the agency is not able to get a good scan of your fingerprints, you will need to complete the ink fingerprint process. If you have not lived in Ohio for the last five consecutive years, you are required to complete both a BCI (Ohio) and FBI (National) ink card.

Card #1: [Ohio Bureau of Criminal Investigation \(BCI\)](#) Card #2: [Federal Bureau of Identification \(FBI\)](#)

The ink card(s) with payment and the [exemption form](#) must be submitted to BCI for processing. Cash, third party or starter checks will not be accepted. A money order, certified check, business check or personal check must be made **payable to:**

Treasurer, State of Ohio

Enclose all background check contents and mail to:

Civilian Unit Identification Dept.

Bureau of Criminal Identification & Investigation (BCII)

P.O. Box 365

London, Ohio 43140

Please Contact the OSU Ext., Clark Co. Office to obtain the Fingerprint Ink Cards and Exemption Form, if good scans can not be obtained of your fingerprints through the electronic format.

Note: The fingerprint background check process reveals past criminal convictions. The Ohio Revised Code specifies certain criminal convictions as disqualifying events that forbid current and future volunteer involvement with Ohio 4-H and OSU Extension. You can view this list at: <http://go.osu.edu/DQoffenses>.

If you would like to be reimbursed for the cost of your background check, keep your original receipt and bring it, along with this form, **to the OSU Extension, Clark Co. Office**. Complete the form below and be sure your name appears on your receipt. We will submit a reimbursement request for you. **Please submit receipt for reimbursement no more than 60 days past your fingerprinting.**

OSU Extension 4-H Volunteer Request for Reimbursement

Volunteer Name (Print first, middle, last): _____

Volunteer Signature: _____ Date: _____

For office use only. Tape receipt to top of this form before scanning.

Date volunteer reimbursement request received at Extension Office: _____ (month / day / year)

Name & initials of OSU Extension Professional receiving request: _____ Initials: _____



DAVE YOST
OHIO ATTORNEY GENERAL



Civilian Identification
Office 877-224-0043
Fax 866-750-0214

REQUEST FOR COPY OF BACKGROUND CHECK PROCEDURES

A request for a copy of a background check may only be submitted if the original background check was processed for an Ohio Revised Code reason that allows for updates and if the new background check is needed for an Ohio Revised Code reason that allows for updates. If you are unsure if you are able to request a copy, please contact the Civilian Identification Dept. toll free at 877-224-0043.

The name on the request of copy form must exactly match the name that was submitted with the prior fingerprints.

You may only request a copy of the Ohio BCI background check. The FBI result is not permitted to be sent to any address other than what was requested at the time of the original background check. To obtain a new FBI result, a new FBI background check would have to be submitted.

If the request for copy is made within 30 days of the original background check there is no fee for processing and the request can be faxed to 866-750-0214.

30 days after the original background check the fee is \$8 and is payable by money order, certified check, business check or personal check to Treasurer, State of Ohio. **No cash will be accepted.** The request must be received within 11 months of the original fingerprint submission in order to have time to process before the background check expires.

The request and payment can be mailed to: BCI, PO Box 365, London Oh 43140.

Civilian Unit
Identification Department
Bureau of Criminal Identification &
Investigation

Revised 01/15/19



DAVE YOST

OHIO ATTORNEY GENERAL



Civilian Identification
Office 877-224-0043
Fax 866-750-0214

REQUEST FOR COPY OF OHIO BACKGROUND CHECK:

REASON FINGERPRINTED ON LAST BACKGROUND CHECK: _____

REASON FINGERPRINTED FOR THIS BACKGROUND CHECK: 4-H Volunteer

*The Ohio Revised Code must be listed in both spaces above

NAME (must be the same name submitted with fingerprints):

SSN: _____ DOB: _____

SEND BACKGROUND RESULT TO:

NAME: OSU Office of Human Resources, Attention Background Check-Clark County

STREET: 1590 N. High Street, Suite 300

CITY: Columbus

STATE: Ohio ZIP CODE: 43201

PLEASE CHECK IF YOU WANT YOUR RESULT SENT TO THE OHIO DEPT. OF
EDUCATION FOR TEACHER CERTIFICATION.

Return this letter with your payment of \$8 (if required), payable to Treasurer, State of Ohio.

I hereby certify that I have given the above mentioned person or agency permission to obtain a
copy of any conviction record pertaining to me in the files of the Ohio Bureau of Criminal
Investigation.

*REQUIRED:

APPLICANTS SIGNATURE: _____

DATE: _____ APPLICANT'S PHONE NUMBER: _____

Updated 03/07/19

P.O. Box 365 | London, Ohio | 43140

www.OhioAttorneyGeneral.gov

Volunteer Position Description

4-H Youth Development

Clark County

Position Title:

4-H Club Organizational Volunteer

Time Required:

50+ Hours

Location:

Communities in Clark County

General Purpose:

- ◆ Support and work in partnership with 4-H professionals, extension staff, volunteers, and members in conducting meaningful educational experiences and developing youth members' life skills to reach their fullest potential. Serve in a leadership role providing overall club management.

Specific Responsibilities:

- ◆ Serve as the primary liaison between 4-H professionals, extension staff, volunteers, members, and families.
- ◆ Maintain and promote communication with all club volunteers, members, and families.
- ◆ Secure, complete, and submit club organization/enrollment materials to the Clark County Extension office by the posted deadline.
- ◆ Provide Clark County Extension office with all requested materials related to the 4-H club.
- ◆ Ensure adequate supervision at all club functions.
- ◆ Involve members in developing club programs, including project work, community service, social events and participation in county, regional and state 4-Hevents.
- ◆ Assist officers to learn their responsibilities.
- ◆ Welcome parent/guardian interest, ideas, support, and attendance at club activities.
- ◆ Follow all OSU Extension and Ohio 4-H Youth Development policies and procedures.
- ◆ Recruit new members when the club has openings.
- ◆ Attend all (or most) of the club meetings and activities.
- ◆ Read Clark County and Ohio 4-H e-mails, weekly/monthly e-updates, 4-H app, project requirements, web pages etc. to keep members and families up-do-date.
- ◆ Participate in volunteer development opportunities to stay current and enhance leadership skills.
- ◆ Inform members/parents of 4-H guidelines and requirements.
- ◆ Provide positive and constructive feedback to members and parents/guardians.



Qualifications:

An individual serving as a 4-H Organizational Advisor must have:

- ◆ Work with volunteers and 4-H professionals to teach and motivate youth, while nurturing positive self-esteem, decision making, responsibility, and leadership.
- ◆ Be dedicated to youth and sensitive to their abilities and needs.
- ◆ Effectively organize, delegate, and communicate with the other club volunteers.
- ◆ Work with minimal supervision from professional staff.
- ◆ Become familiar with and work within the philosophy and guidelines of OSU Extension, Ohio 4-H Program and the Clark County 4-H program.

Ohio State University Extension Agrees to:

- ◆ Provide training opportunities to assist volunteers to meet needs of members and families.
- ◆ Provide access to educational materials and resources.
- ◆ Have professional staff available to consult with and listen to volunteers.
- ◆ Provide recognition to volunteers.

Mentor/Supervising Professionals:

Patty House

Extension Educator

4-H Youth Development

OSU Extension, Clark Co.

3130 East Main Street

Springfield, OH 45505

937-398-7599

house.18@osu.edu

[web: https://clark.osu.edu](https://clark.osu.edu)

Updated 11/2023.



THE OHIO STATE UNIVERSITY
EXTENSION



CFAES provides research and related educational programs to clientele on a nondiscriminatory basis.
For more information: go.osu.edu/cfaesdiversity.

clark.osu.edu

Volunteer Position Description

4-H Youth Development

Clark County

Position Title:

4-H Club Volunteer (Project and Resource)

Time Required:

40 hours+

Location:

Communities in Clark County

General Purpose:

- ◆ Support and work in partnership with 4-H professionals, extension staff, volunteers, and members in conducting meaningful educational experiences and developing youth members' life skills to reach their fullest potential.

Specific Responsibilities:

- ◆ Provide a variety of 4-H project related learning experiences:
 - Coordinate and conduct educational activities related to projects.
 - Monitor progress towards project completion.
 - Prepare members for knowledge assessment of projects, including but not limited to judging, Skill-a-thon, and/or exhibition.
 - Inform members of project requirements and deadlines.
 - Provide constructive feedback to members, parents, and families.
- ◆ Advise members in coordinating/conducting club activities, including:
 - club meetings, community service, fund-raising, club trips & tours, learning activities, recognition events and leadership activities.
- ◆ Promote 4-H opportunities in your club and local community, including:
 - Encourage family and member participation.
 - Inform members of county 4-H events & activities.
 - Recruit new members and retain current members.
- ◆ Actively participate as a volunteer by:
 - Follow OSU Extension and 4-H Youth Development policies and procedures.
 - Attend club meetings and activities.
 - Read and review all forms of communication to keep members, parents, and other volunteers informed.
 - Participate in volunteer development opportunities to enhance leadership skills.



Qualifications:

An individual serving as a 4-H Club Advisor must have:

- ♦ Ability, interest, and willingness to:
 - Work with volunteers and 4-H professionals to teach and motivate youth while nurturing positive self-esteem, decision making, responsibility, and leadership.
 - Be dedicated to youth and sensitive to their abilities and needs.
 - Effectively organize and communicate with the other club volunteers.
 - Work with minimal supervision from professional staff.
 - Become familiar with and work within the philosophy and guidelines of Ohio State University Extension, Ohio 4-H Program and the county 4-H program.

Ohio State University Extension Agrees to:

- ♦ Provide training opportunities to assist volunteers to meet needs of members and families.
- ♦ Provide access to educational materials and resources.
- ♦ Have professional staff available to consult with and listen to volunteers.
- ♦ Provide recognition to volunteers.

Mentor/Supervising Professional:

Patty House

Extension Educator

4-H Youth Development

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Volunteer Position Description

4-H Youth Development

Clark County

Position Title:

4-H Cloverbud Volunteer

Time Required:

40 hours+

Location:

Communities in Clark County

General Purpose:

- ◆ Support and work in partnership with 4-H professionals, volunteers, and members in conducting meaningful educational experiences to help youth grow and reach their fullest potential.

Specific Responsibilities:

- ◆ Willingness to become familiar with and work within the philosophy and guidelines of Ohio State University Extension, Ohio 4-H Program, and Clark County 4-H program.
- ◆ Follow the Cloverbud guidelines and policies of Ohio State University Extension, Ohio 4-H Program, and Clark County 4-H program.
- ◆ Provide an emotionally and physically safe environment.
- ◆ Serve as a liaison between the Clark County Extension office/staff and 4-H Cloverbud members, their parents/guardians, and those working with you.
- ◆ Support 4-H professionals and members in conducting meaningful educational experiences to help young people grow and reach their fullest potential.
- ◆ Inform and encourage members, parents, and other volunteers to actively participate in appropriate 4-H opportunities.
- ◆ Give support and recognition to Cloverbuds.
- ◆ Understand the importance of being a positive role model.
- ◆ Have fun.
- ◆ Let the 4-H Cloverbud children know you care.
- ◆ Be committed to young people and their growth in all areas.
- ◆ Utilize the Ohio 4-H Cloverbud Curriculum Instructional materials or other approved activities while working with 4-H Cloverbud children.
- ◆ Be aware of available learning experiences and help the club members select appropriate activities.
- ◆ Maintain open communications with other club volunteers.
- ◆ Be dedicated to young people and sensitive to their needs.
- ◆ Attend 4-H Cloverbud events, meetings, and activities.
- ◆ Read 4-H e-mails, e-blast texts and weekly/monthly updates, social media posts, 4-H App, web site info and other communication to keep members, parents, and others informed.
- ◆ Participate in appropriate volunteer development opportunities.



Qualifications:

An individual serving as a 4-H Cloverbud Volunteer must have:

- ◆ Work with volunteers and 4-H professionals to teach and motivate youth, while nurturing positive self-esteem, decision making, responsibility, and leadership.
- ◆ Be dedicated to youth and sensitive to their abilities and needs.
- ◆ Interest in learning the characteristics of 4-H Cloverbud-aged children.
- ◆ Work with minimal supervision from professional staff.
- ◆ Become familiar with and work within the philosophy and guidelines of OSU Extension, Ohio 4-H Program and the Clark County 4-H program.
- ◆ Attend annual volunteer training as directed by Clark County 4-H professional.

Ohio State University Extension Agrees to:

- ◆ Provide training opportunities to assist volunteers to meet needs of members and parents.
- ◆ Provide access to educational materials and resources.
- ◆ Approve 4-H Cloverbud curriculum and activities per Ohio 4-H Cloverbud guidelines other than the Big Book of Cloverbud Activities.
- ◆ Have professional staff available to consult with and listen to volunteers.
- ◆ Provide recognition to volunteers.

Mentor/Supervising Professional:

Patty House

Extension Educator

4-H Youth Development

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Volunteer Job Description 4-H Youth Development Clark County

Position Title:

4-H Volunteer Committee Member

Time Required:

20+ hours

Location:

Clark County Committees: 4-H, Beef, Dairy, Dog, Goat, Family & Consumer Sciences, Horse, Rabbit & Poultry, Sheep, Shooting Sports, and Swine

General Purpose:

- ◆ Support and advise 4-H professionals about the current and future needs of county youth, volunteers, and families in order to promote and foster involvement in 4-H Youth Development Programs.

Specific Responsibilities:

- ◆ Plan, conduct, evaluate and recommend hands-on experientially based educational program for youth and volunteers based on county needs.
- ◆ Lead and assist with competitive and educational events including, but not limited to clinics, workshops, fundraisers, skill-a-thons, project judging, contests, shows, weigh-in's, tag-in's, identification days, quality assurance, Equi-STEP and promotional events.
- ◆ Represent assigned group/area based on county structure and partner in advocating for youth involvement and volunteer support.
- ◆ Attend committee meetings according to the committee's constitution and actively participate in the committees' business, goals, objectives, mission and overall efforts in a positive manner.
- ◆ Assist in the recruitment and educational development of 4-H volunteers and youth.
- ◆ Encourage participation from parents, members, families and the community in 4-H programs and activities at the county and state levels.
- ◆ Keep informed and share 4-H information communicated the website, social media, emails, 4-H app, etc.
- ◆ Inform 4-H professional concerning training and resource needs of members or volunteers.
- ◆ Assist in securing resources to conduct, promote, and expand the 4-H program.
- ◆ Promote favorable public relations and a positive image of the 4-H program.
- ◆ Participate in educational opportunities to further knowledge and skills.
- ◆ Work with the 4-H professional, volunteers and youth in a positive manner that promotes teamwork and collaboration with the 4-H program.
- ◆ Become familiar with and work within the philosophy, guidelines, and standards of behavior of the Ohio State University Extension, Ohio 4-H Program and the Clark County 4-H Program.

Qualifications and Skills Needed:

An individual serving as a Volunteer Committee Member must have:

- ♦ A sincere interest in **TEACHING and SHARING** knowledge and skills with youth and adults in an educational setting.
- ♦ The ability to **PLAN and ORGANIZE** information and events to carry out the goals of the committee.
- ♦ The ability to work and **COMMUNICATE** effectively in verbal and written forms.
- ♦ The desire to serve in leadership roles and to motivate members, parents, and other volunteers to assume **LEADERSHIP** opportunities for the betterment of the overall 4-H program.
- ♦ The ability to promote **TEAMWORK** and be a team player for effective **DECISION MAKING** and **PROBLEM SOLVING**.

Ohio State University Extension Agrees to:

- ♦ Provide orientation and training opportunities to assist Committee Members in being successful in their position.
- ♦ Provide access to educational materials and resources.
- ♦ Provide appropriate recognition of members for their service.
- ♦ Collaborate to fulfill the goals of the committee.

Mentor/Supervising Professional:

Patty House

Extension Educator

4-H Youth Development

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