

20 Park St, Room 202 Fonda, NY 12068 t. 518.853-2135 f. 518.853-2129 www.ccefm.com

December 1, 2016

Dear Cooperative Extension Volunteer,

Cornell Cooperative Extension (CCE) has a volunteer involvement policy that is being consistently implemented throughout New York State as of September 2005. Providing a safe environment for all CCE participants is an organizational priority.

CCE of Fulton and Montgomery Counties has been diligent in implementing this policy for all volunteers. *An elected volunteer* is a person who was nominated and elected to serve as part of the officially established governance of the CCE Association in accordance with the rules set forth in NY County Law 224 (8)(b) and the CCE Association Constitution. *An enrolled volunteer* is a person who accepts a role defined by a written volunteer position description for a period of at least one year. In addition to a completed volunteer application, a signed CCE volunteer agreement/code of conduct, and reference checks, we will check the motor vehicle record and/or criminal background for those *enrolled volunteer* positions where they are required.

We want you to know that the information we gather will be kept in a secured file cabinet and may be updated periodically. Information will be kept on file for a minimum of 6 years following the receipt of your volunteer application or the termination of your involvement as a volunteer for CCE (whichever is longest).

Please return your completed and signed volunteer application, authorization/consent form, DMV form, and signed code of conduct in the enclosed envelope marked "confidential" to Brian Gilchrist in the CCE Office **ASAP**.

Thank you for participating in this process. If you have questions or concerns about the CCE volunteer involvement screening procedures, please contact me at 853-2135 or gad23@cornell.edu.

Sincerely,

Georgía Dutcher

Georgia Dutcher Administrative Assistant

Enclosures



Cornell University Cooperative Extension

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Fulton & Montgomery Counties Volunteer Application

Directions: *Type or print, using black ink

*If you need additional space, attach a separate sheet

*Sign the completed application

GENERAL				
NAME (Last)	First		Middle	Today's Date
Mailing Address - Street			Daytime Phone #	Evening Phone #
				()
City	State	ZipCode	Email address if any	Birthdate if under 18
Have you ever volunteered for	· CCE before, eit	her in this or a	nother county? If yes, giv	ve dates, program, position
□ Yes				
□ No	3,0000 10,0000 1000			www.many.hours/wool; would you
Date available? From To			ke to volunteer?	ow many hours/week would you
VOLUNTEER POSITI	ON: Plance che			u are applying.
4-H Leader	OIV. Tiease che	CK the volunt	Organizing events/activ	
4-H Program (other than clu	b)	-	Program development	
Master Gardener	0)		Marketing the organization	
Nutrition Program		_	Resource development – fund raising	
Financial Literacy Program		-	Other: (please specify)	
What interests do you wish to pu	rsue or what do yo	u hope to accom	plish by serving as a CCE v	olunteer?
List your volunteer, paid, or educ	cational experience	es that relate to t	he volunteer position you so	eek
Organization/Employer		Position/Activi	ty	Dates
	and the second s			
			- Land	
Describe any education or training	ag that you have he	ad related to the	volunteer position you seek	. Also describe any special skills,
experiences, or interests along wi	th hobbies, license	s, certifications,	or other interests you consi	der relevant.
experiences, or interests mong		,	·	

Accommodations: Given the physical or health accommod	e expectations of the volunteer positions that may be needed to allow y	ion for which you are applying, describe any ou to participate in the activity.
activities?Yes _	No	s of transportation to and from volunteer
REFERENCES: List 3 peo	ple, not CCE staff and not those re alifications. Please provide complet	lated to you, that we may contact who te addresses.
Name	Mailing Address	Daytime Phone #
NO Yes (If ye NOTE: A criminal record	cted of a criminal offense other than a es) Date(s)will not necessarily bar an applicant. A cirements of the volunteer position for wh	criminal record will be considered as it
Do you possess a valid NY NOTE: CCE recommends However, under certain circ driver's license, car registr	S Driver's License? Yes that volunteers not drive others to CCE	Nononsored activities and events. ccur. I therefore verify that I have a valid e insurance as required by the state. I
facts requested is cause for my authorize Cornell Cooperative including those not named her suitability to perform the dutie involves unsupervised work criminal background check	/ non-appointment or removal as a Content Extension of Fulton and Montgomer e, and/or agencies any records, documents of the volunteer position. I underswith minors, individuals over 65, of including a sexual offender search	erstand that misrepresentation or omission of ornell Cooperative Extension volunteer. I ry Counties to obtain from all persons, ments, and other information relative to my stand, if the volunteer position I seek or individuals with disabilities that a will be made. I further release all parties ing from their supplying said information.
benefits of any kind. I further (either expressed or implied) of am offered and accept a volun any time for any reason or for policies and procedures application volunteer position is continger	understand that the provisions of this of employment between myself and C teer position at CCE, either I or CCE no particular reason or cause. CCE is	In I am applying, is without compensation or application do not constitute a contract CCE. I further understand and agree that if I is, may terminate the volunteer relationship at reserves the right to determine and change its y reason. I understand and agree that my ing the CCE Association Volunteer on Volunteer Code of Conduct.
Sionature		Date



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AUTHORIZATION/CONSENT

During the application process and at any time during the tenure of my volunteer service with Cornell Cooperative Extension of Fulton and Montgomery Counties, I hereby authorize LexisNexis, on behalf of Cornell Cooperative Extension of Fulton and Montgomery Counties, to procure a consumer report which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with information from courts record repositories, department of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics.

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Volunteer Signature		Date	
	Address		
Social Security Number*		Date of Birth	
*For identification purposes only			

BACKGROUND VERIFICATION DISCLOSURE

This is used to information you that a consumer report is being obtained from a consumer reporting agency for the purpose of evaluating you for volunteer service, including retention as an employee.

This report may contain information bearing on your character, general reputation, and personal characteristics from public or private record source.

Building Strong and Vibrant New York Communities

Cornell Cooperative Extension Association Volunteer Agreement

We are pleased that you have accepted a volunteer assignment to Cornell Cooperative Extension Association of Fulton and Montgomery Counties (hereinafter referred to as "CCE"). Please accept our sincere thanks for your valuable contribution to Cornell Cooperative Extension.

- 1. I agree that as a CCE volunteer my participation in the activities outlined in the attached volunteer position description is without monetary or other compensation. That document, including the Code of Conduct it contains, shall be considered a part of this agreement.
- 2. I understand that CCE shall have the right to suspend or release me as a volunteer at any time and for any reason, within the discretion of CCE. I also understand that I have the right to terminate this agreement, recognizing that if I receive significant training for the volunteer position that there is an expectation of volunteer service.
- 3. I understand that CCE does not provide volunteers with medical insurance; therefore CCE is not responsible for any medical expenses incurred by me. Further, I understand that I am neither covered by Worker's Compensation nor entitled to employee benefits as a result of my CCE volunteer affiliation.
- 4. CCE will cover me as a volunteer under the CCE commercial general liability to protect me against any covered claims for injury to persons or damage to property arising out of my activities as a volunteer. In exchange for volunteer liability insurance protection I, on behalf of myself, my heirs and my representatives, do hereby release Cornell Cooperative Extension and the Association, its officers, directors, employees, and other volunteers from any liability whatsoever for any injury to myself, including death, or damage to my property that arises out of or is in any way related to my volunteer activities unless my injury is the result of the sole negligence of Cornell Cooperative Extension or the Association. I understand that the liability insurance coverage only applies when I am on duty, acting in accordance with CCE guidelines for my volunteer assignment, and all other applicable pre-conditions for coverage under the CCE insurance policy are met.
- 5. CCE agrees to provide the orientation, training, supervision, and support deemed necessary by CCE for the successful fulfillment of my volunteer responsibilities.
- 6. I am aware of the terms and conditions of this agreement and agree that the provisions of this agreement do not constitute a contract, either expressed or implied, for employment between CCE and myself.
- 7. This agreement is valid until it is terminated by CCE or by me.

(OVER)

Cornell Cooperative Extension Association Volunteer Code of Conduct

Cornell Cooperative Extension (CCE) Volunteers are required to accept and adhere to the following standards of behavior when engaged in assigned volunteer activities.

- Respect and adhere to CCE rules, policies and guidelines that relate to volunteer activity and the program I serve.
- Execute CCE business in an ethical manner.
- Preserve the confidentiality of information (and sign confidentiality agreement if required by my volunteer role) about program participants and CCE internal affairs that have been entrusted to me as affirmed by my signature on the Volunteer Confidentiality Agreement.
- Refrain from using my CCE volunteer status for personal or business financial gain.
- Fulfill my assigned volunteer duties, including completion of required records or reports, in a timely manner.
- Use my time wisely and work cooperatively with Extension staff and other volunteers.
- Participate in required training programs and use the recommended policies and procedures.
- Accept supervision and support from professional Extension staff and/or supervisory volunteers.
- Respect and uphold the rights and dignity of all staff, other volunteers, and all individuals who participate in CCE programs recognizing that people's values, beliefs, customs, and strengths differ.
- Encourage participation of and respect for individuals of diverse backgrounds, cultures, and perspectives.
- Refrain from the use of alcohol, tobacco and inappropriate language.
- Commit no illegal or abusive act.
- Report all unsafe conditions and accidents to professional Extension staff as soon as possible.

5 0	· ·	this agreement, I acknowledge that I have made in the Volunteer Agreement and the
CCE Volunteer		Date
CCE Representative	Name	Title
Date	-	ritte

Club Name:	Statu	s (circle one): New I	Re-Enrollment
Last Name:	First Name:		MI:
Birth Date :(youth only)		e: (as of January 1) Ye	
Home Phone: ()	Mobile Phone: (her Phone: ()
Email:		Email Newsletter? Y N	
Address Line 1:			
Address Line 2:			
City:	State:	Zip:	
County of residence (circle one): Full Current other 4-H club membership(s			
Is enrollee disabled? Y N	Disability:	Require ac	ecommodation for program? Y N
School (youth only):			
Is enrollee from a military family?	Y N If yes, circle one	: Active/Reserve/Guard? Bra	inch:
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Cornell Cooperative Extension Volunteer Code of Conduct

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To maintain a responsible relationship with Cornell Cooperative Extension (CCE) I will:

- Respect and adhere to CCE rules, policies and guidelines that relate to volunteer activity and the program(s)
 I serve:
- Execute CCE business in an ethical manner;
- Preserve the confidentiality of information about program participants and CCE internal affairs that has been entrusted to me;
- Refrain from using my CCE volunteer status for personal or business financial gain;
- Fulfill my assigned CCE volunteer duties including completion of required records or reports in a timely manner:
- Use time wisely and work cooperatively with CCE staff and other volunteers;
- Participate in required training programs and use the recommended CCE policies and procedures;
- Accept supervision and support from professional CCE staff and/or management volunteers.

To maintain respectful relationships with individuals encountered through CCE volunteer activities I will:

- Respect and uphold the rights and dignity of all CCE staff, other volunteers and all individuals who
 participate in CCE programs recognizing that people's values, beliefs, customs and strengths differ;
- Encourage participation of and respect for individuals of diverse backgrounds, cultures and perspectives;
- Commit no illegal or abusive act.

To maintain a safe and healthful environment for CCE program/activity/event participants I will:

- Follow child protection guidelines
- Refrain from inappropriate language and the use of alcohol especially in the presence of minors and never attend or participate in a CCE program/activity/event under the influence of alcohol or controlled substances;
- Use tobacco products only where legally permitted and refrain from the use of tobacco products while
 conducting or assisting in any CCE program/activity/event or in other group situations that may glamorize
 such use in the eyes of young people;
- Bring no firearm to any CCE program/activity/event except when essential to the purpose of the program/activity/event;
- Use any potentially dangerous item in accordance with the safety procedures prescribed for the program;
- Report all unsafe conditions and accidents to professional CCE staff as soon as possible;
- Handle any animals, machinery, equipment, vehicles or other CCE property that has been entrusted to me
 in a safe and responsible manner;
- Observe all state and federal laws with respect to power equipment and minors.

I permit the use of any photos, slides, films, or sketches of me taken during a CCE event to be used for publici	ity,
advertising, and/or promotion.	

I accept responsibility to represent	t CCE with dignity and pride conducting myself as a positive role model for
CCE program/activity/event partic	ipants. I will adhere to the standards of behavior listed above.
Name	Date
Signature	