

Volunteer and Leader Application - Category 2 & 3 University of Kentucky Cooperative Extension Service

Kentucky Cooperative Extension Service (CES) takes seriously its obligation to provide a safe environment for all people. This application allows Extension Personnel the opportunity to know volunteers better, along with clearly communicating expectations of the volunteer role. The information provided will be used for the purpose of completing background checks. More information about the checks can be found on pages 4-11 of this application form.

I. GENERAL INFORMATION

Name: _____
(FIRST) (MIDDLE) (LAST)

Phone: Primary: _____ Mobile: _____
Work: _____ Email : _____

Current Mailing Address: _____
(STREET, BOX, ROUTE, APT #) (CITY) (STATE) (ZIP)

Residential Address (If different from above): _____
(STREET, BOX, ROUTE, APT #) (CITY) (STATE) (ZIP)

Seven Year Address History (Use additional pages if necessary)

Address 2: _____

From: _____ To: _____

Address 3: _____

From: _____ To: _____ (add additional page if needed)

Social Security Number: _____ Date of Birth: _____

Maiden/Alias Names and Dates Used: _____

Ethnicity: (check one): ☐ Hispanic or Latino ☐ Not Hispanic or Latino

Race (check all that apply): ☐ White ☐ Black or African American
☐ American Indian or Alaskan Native ☐ Asian ☐ Native Hawaiian or Other Pacific Islander

Biological Sex: ☐ Female ☐ Male



(General information continued)

Occupation: _____

Employer: _____

I certify that all the details above and in "General Information" (Section I) are true and correct.

I understand that failure to provide the information requested will prohibit my involvement as a volunteer for the University of Kentucky. I understand that failure to accurately provide the information requested may result in my prosecution under KRS 523.100.

I hereby give permission to the University of Kentucky to obtain a Criminal Record and Sex Offender Report, and a Child Abuse and Neglect Registry check on me.

Volunteer Signature

Date

II. EMERGENCY CONTACT INFORMATION

Name: _____
(FIRST) (MIDDLE) (LAST)

Email: _____

Phone: Primary: _____ **Mobile:** _____

Other: _____ **Work:** _____

III. VOLUNTEER EXPERIENCE

Did your volunteer experience include working with vulnerable audiences*? ☐ **Yes** ☐ **No**

**Vulnerable audiences include, but are not limited to: youth, home-bound, physically, mentally or emotionally challenged, disadvantaged, and underprivileged.*

If yes, please explain: _____

Extension staff member with whom you have worked (if applicable):

Name: _____

Phone: _____ State: _____

Previous Volunteer Experience (List current experience first)

(ORGANIZATION) (VOLUNTEER ROLE) (YEAR(S))

(ORGANIZATION) (VOLUNTEER ROLE) (YEAR(S))

IV. PERSONAL REFERENCES

List two people, not related to you, who know about your qualifications and experiences working as a volunteer. If you have previous experience as a volunteer with a youth organization, ideally, one reference should be from that youth organization. Please include complete address and phone number.

1. Name: _____ Cell phone: _____
Work phone: _____ Email: _____
Address: _____
How do you know this person? _____

2. Name: _____ Cell phone: _____
Work phone: _____ Email: _____
Address: _____
How do you know this person? _____

I authorize the contact of the references listed above. _____

Volunteer Initial

Date

V. ACKNOWLEDGEMENT, AUTHORIZATION, RELEASE, AND WAIVER

Acknowledgement of Policies - If accepted as a volunteer, I agree to abide by the regulations, policies, rules, standards, codes of conduct and procedures ("Policies") of the University of Kentucky and its Cooperative Extension Service ("University") and to fulfill my volunteer responsibilities to the best of my abilities. I understand that all University Policies are subject to change in the University's sole discretion and that it is my responsibility to stay informed about and comply with the current University Policies. I understand that the purpose of 4-H Youth Development programs is to develop youth individually and as responsible, productive citizens. I recognize that Extension programs are part of the Martin-Gatton College of Agriculture, Food and Environment, in which USDA, the University of Kentucky, Kentucky State University, and all Kentucky counties share. I understand that this document is not a contract, that volunteers are not employees of the University, that volunteers serve at the will of the University and that my volunteer status can be discontinued at any time for any reason or no reason, in the sole discretion of the University with or without prior notice.

I will ensure that educational programs of the University of Kentucky Cooperative Extension Service serve all people and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, physical or mental disability or reprisal or retaliation for prior civil rights activity. I agree to abide by state and federal laws prohibiting discrimination on the basis of these protected classes. I understand and agree to comply with all policies of the University of Kentucky Cooperative Extension Service and the United States Department of Agriculture.

(continued next page)

V. ACKNOWLEDGEMENT, AUTHORIZATION, RELEASE, AND WAIVER

(CONTINUED)

I have read, understand and agree to fulfill the purpose and responsibilities of this volunteer position and further agree to accept guidance and direction from the University. I will notify the supervising professional if I am no longer interested in serving.

Background Check Authorization - I understand and agree that successful completion of a background and sex offender check including a state and national criminal background check, and Child Abuse and Neglect Registry check showing no findings of substantiated child abuse or neglect found through a background check of child abuse and neglect records, and a successful motor vehicle records check (collectively "background checks") is required. I understand and agree that the University may obtain these background checks on me and that these background checks may be updated periodically by the University in its sole discretion during my volunteer role and that successful completion of these background checks is required. I further understand and agree that the University in its sole discretion will determine what constitutes a successful background check.

I hereby authorize the University of Kentucky to obtain these background checks for purposes of determining my eligibility to volunteer with the University of Kentucky Cooperative Extension Service and agree they may be updated without requiring further notice to or authorization by me.

Media Release - I am eighteen (18) years of age or over, and hereby grant permission to the University of Kentucky and its affiliates and subsidiaries, including but not limited to the UK Alumni Association, UK Athletics Association, and UK Research Foundation, to interview, photograph, and/or videotape me; and/or to supervise any others who may do the interview, photography, and/or videotaping; and/or to use and/or permit others to use information from the aforementioned interview and/or the aforementioned images in educational and promotional activities for the following without compensation: UK Educational Publications/Videos; UK Electronics Publishing (e.g., World Wide Web); UK Promotion/advertising; Local/Regional/National News Media (with permission of UK.)

☐ I permit _____ (Initial)

Driver's License – I will provide my driver's license for a copy to be made by the extension office and submitted with this application. (Category 1-needed for CAN check; Category 2-needed for CAN check and driving authorization).

Waiver – I hereby assume any and all risks associated with this volunteer position and expressly waive, release, discharge and hold harmless, the University of Kentucky, its trustees, directors, officers, agents, employees and assigns from and against any and all liability for loss, damage, injury, illness or claim of any nature whatsoever, however caused, arising out of, in association with, or related in any way to my volunteer role.

I have read, understand and agree to the above:

Volunteer Signature

Date

VI. KY CES EXPECTATIONS FOR VOLUNTEERS

Trust is placed in the Kentucky Cooperative Extension Service to provide quality leadership and care for individuals participating in CES programs. The opportunity to volunteer is a privileged position of trust that should be held only by those who are willing to demonstrate behaviors that fulfill this trust. These expectations for volunteers guide their involvement in Kentucky Extension activities.

The purpose of these expectations for volunteers is to ensure the safety and well-being of all participants (i.e., youth, their parents and families, volunteers and paid staff). Kentucky CES volunteers are expected to function within the guidelines of University of Kentucky Cooperative Extension.

As an Extension Volunteer:

- I will represent Kentucky CES to youth and adults by conducting myself with courteous manners and language, exhibiting good sportsmanship, serving as a positive role model, and demonstrating appropriate conflict resolution skills.
- I will abide by all applicable laws, UK and CES rules, policies, and guidelines. This includes, but is not limited to, policies and procedures related to: child abuse, fiscal management procedures and substance abuse.
- I will accept supervision and support from Extension staff or management volunteers.
- I will participate in orientation and on-going volunteer education and development, including client protection standards.
- I will not consume or allow others to use alcohol or illegal drugs at any UK CES function.
- If I have been designated as a volunteer authorized to transport others, I will, when transporting others, operate vehicles and equipment in a safe and reliable manner and only with a valid operator's license. I will comply with all vehicular regulations and laws. All passengers will be secured by properly operating seat belts. I have the minimum vehicle insurance coverage required by the Commonwealth of KY. I will promptly notify the University of any change to my motor vehicle record (i.e., traffic violations, DUI, suspension, etc.)
- I will accept the responsibility to promote and support the vision, mission, and values of Kentucky CES and its programs.
- I will conduct myself in a manner that is in the best interest of youth, adults and CES and will not use the volunteer position for purposes of personal gain.
- I will treat animals in a humane manner and teach program participants to provide appropriate animal care and management.
- I will use technology (including social media) in an appropriate manner that reflects the best practices in youth development and in accordance with University policy, including University policy concerning the use of images.
- I will not practice, condone, tolerate, or allow bullying, hazing, harassment, or malicious pranks.
- I understand that this position is a volunteer position that serves at the will of the University and may be discontinued at any time, for any reason or no reason, with or without prior notification in the sole discretion of the University.
- I understand that I will be asked to sign a volunteer position description(s) provided by the county extension office specific to my volunteer role(s).
- I will ensure that educational programs of KY Cooperative Extension serve all people regardless of economic or social status and will not discriminate. View the Extension Non-Discrimination Statement at: <https://psd.ca.uky.edu/affirmativeaction>.

I have read, understand, and agree to abide by these expectations for volunteers.

Volunteer Signature

Date

Signature of Supervisor or Volunteer

Date

Note required signature authorization on page 11

Disclosure Regarding Volunteer Background Report

The University of Kentucky may obtain from Sterling Volunteers, 4511 Rockside Road, 4th Floor, Independence, OH 44131, 855-326-1820 Option 3, www.sterlingvolunteers.com, a consumer report (“REPORT”) that contains background information about you in connection with your volunteer position. If you are onboarded in a volunteer position, to the extent permitted by law, the University of Kentucky may obtain from Sterling Volunteers further reports throughout your volunteer position without providing further disclosure or obtaining additional consent.

The REPORT may contain information about your character, general reputation, personal characteristics and mode of living. The REPORT may include, but is not limited to, credit reports and credit history information; criminal and other public records and history; public court records (e.g., bankruptcies, tax liens and judgments); motor vehicle and driving records; educational and employment history, including professional disciplinary actions; drug/alcohol test results; and Social Security verification and address history, subject to any limitations imposed by applicable federal and state law. This information may be obtained from public record and private sources, including credit bureaus, government agencies and judicial records, former employers and educational institutions, and other sources.

Disclosure for Investigative Consumer Report

The University of Kentucky may request an investigative consumer report about you from a third-party consumer reporting agency, in connection with your volunteer position and throughout your volunteer position if you are hired or onboarded as allowed by law.

A consumer report is a background report which may include but is not limited to, credit report, criminal background, driving records, character, general reputation, personal characteristics and mode of living.

An “investigative consumer report” is a background report that includes information from personal interviews. The most common form of an investigative consumer report in connection with your volunteer position is a reference check through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, or mode of living.

You have the right, upon written request made within a reasonable time, to request from the University of Kentucky (1) whether an investigative consumer report has been obtained about you, (2) disclosure of the nature and scope of any investigative consumer report and (3) a copy of your report. These reports will be prepared by Sterling Volunteers 4511 Rockside Road, 4th Floor, Independence, OH 44131, 855-326-1820 Option 3, www.sterlingvolunteers.com.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

A Summary of Your Rights Under the Fair Credit Reporting Act (continued)

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account.

Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact: (see next page)

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>

TYPE OF BUSINESS:	CONTACT:
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

Authorization to Obtain Volunteer Background Report

I have read the Disclosure Regarding Volunteer Background Report provided by University of Kentucky and this Authorization to Obtain Volunteer Background Report. By my signature below, I hereby consent to the preparation by Sterling Volunteers, a consumer reporting agency located at 4511 Rockside Road, 4th Floor, Independence, OH 44131, 855-326-1820 Option 3, www.sterlingvolunteers.com, of background reports regarding me and the release of such reports to the University of Kentucky and its designated representatives, to assist the University of Kentucky in making a volunteer position decision involving me at any time after receipt of this authorization and throughout my volunteer position, to the extent permitted by law. To this end, I hereby authorize, without reservation, any state or federal law enforcement agency or court, educational institution, motor vehicle record agency, credit bureau or other information service bureau or data repository, or employer to furnish any and all information regarding me to Sterling Volunteers and/or the University of Kentucky itself, and authorize Sterling Volunteers to provide such information to the University of Kentucky. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

I acknowledge receipt of a copy of the Consumer Financial Protection Bureau's "A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT."

Signature: _____ **Date:** _____

Print Name: _____

To be completed by Category 3 Volunteers ONLY

Motor Vehicle Record (MVR) Release and Information Form

UK Risk Management
306 Peterson Service Building
Lexington, KY 40506-0005
Phone: (859) 257-3708

Services provided by:
Underwriter's Safety & Claims
Phone: (502) 244-1343

Please attach scan of Drivers'
License.

Department Information:

UK Department: _____ Department Number: _____

Supervisor/Contact: _____ Supervisor/Contact Phone: _____

Driver Information: ☐ Employee ☐ Volunteer for _____ County ☐ Other: _____

Name: _____ Work Phone: _____
(Exactly as it appears on Drivers' license)

Address: _____ City: _____ ST: _____ Zip: _____

Sex: _____ Date of Birth: _____ County: _____

Drivers License Number: _____ State: _____

Years Driving Experience Yrs.: _____ Mos.: _____

In connection with any application made by me, I understand that investigative background inquiries may be made on me concerning matters of motor vehicle information. I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my driving records.

I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information and agree to hold harmless, the University of Kentucky, its Board of Trustees, officers, employees, agents, and representatives from any liability and/or responsibility for doing so. I hereby give consent to the University of Kentucky to obtain such information from Underwriter's Safety & Claims and/or any of their agents. This authorization and consent shall be valid in an original, fax, copy or electronic form. I recognize that these inquiries may be made randomly in the future and no further authorization is required by me.

Failure to provide all information requested may result in a delay of University of Kentucky driving privileges.

Driver's Signature: X _____ Date: _____

For Internal Use Only:

Email completed forms to Eunice Ausby in UK Risk Management at: Eausby@uky.edu

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