## **CONFIDENTIAL INFORMATION**



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Driver_	
Approve	

**EXTENSION VOLUNTEER APPLICATION**(To be completed by volunteers in University of Illinois Extension Master Naturalist programs)

Name			E	E-mail	
	Last	First	Middle		_
Address		City		2	
		•		State	Zip
Date of birth	Month/Day/\	Vear			
Phone: Day		Evening:	Best ti	me to call:	
Why do yo	u want to becom	ne a University of Illino	is Extension Master N	aturalist?	
Are you av	railable for class	s affiliations with the U room training during re eer time during regular	egular daytime busines	s hours? Yes	No
Are you av	railable for class	room training during re	egular daytime busines	s hours? Yes	No
Are you av Are you av Have you l	railable for classi railable to volunt been in another	room training during re	egular daytime busines r daytime business hou ram? If yes, where and	s hours? Yes	No
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List special skills, training and education:
Have you ever been convicted of a criminal offense? Yes No (If yes, please attach a sheet to explain.) A conviction will not necessarily disqualify an applicant. A conviction will be considered as it relates to the specifics of the position for which you have applied.
I authorize the University of Illinois to conduct a criminal conviction background check, a DCFS Child Abuse and Neglect Tracking System (CANTS) background check, the national Sex Offender Register, and other sources as necessary.
I understand that I must be officially accepted before beginning my volunteer position. I understand that misrepresentation or omission of facts requested in this application is cause for rejection as an Extension volunteer. I agree to fulfill the responsibilities of this volunteer position to the best of my ability if appointed. I understand that failure to comply with the rules may lead to dismissal from this volunteer position.
Further, I agree to complete Protection of Minors training mandated by University of Illinois Extension and to follow any rules related to the University's Protection of Minors Policy, including mandated reporting to the University of Illinois Police Department (217-333-1216) and a U. of I. Extension employee of the unit for which I am volunteering (e.g., County Director).
Signature Date
Optional Questions: The following information is being asked to help track our success in attracting a diverse population of volunteers. This information will NOT be used in assessing the applicant's suitability for serving as a volunteer.
Gender:MaleFemale
Residence: Town under 10,000 or rural non-farmTown/city of 10,000-50,000 Farm
Ethnicity: (select 1)Hispanic or LatinoNot Hispanic or Latino
Race: (select one or more)WhiteBlack/African AmericanAmerican Indian/Alaskan Native
AsianNative Hawaiian/Pacific Islander Other
Return the application at your earliest convenience to assure prompt processing. Please contact us if you have any questions or wish further information.
Return to: University of Illinois Extension 402 Ava Rd. Murphysboro, IL 62966
Attention: Master Naturalist Program
Revised 2013

Issued in furtherance of Cooperative Extension Work, Acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, and the Associate Dean and Director, University of Illinois Extension. University of Illinois Extension provides equal opportunities in programs and employment