



Cornell University
Cooperative Extension
Cortland County

CCE Cortland County
 Room 105
 60 Central Avenue
 Cortland, NY 13045

Tel: 607-391-2660
 Fax: 607-391-2680
 E-mail: cortland@cornell.edu
www.cornell.edu/cortland/

Extension Association Volunteer Information Form

Volunteer Applicant: So we are able to match your skills and talents with the volunteer opening best suited for you, we need to get to know you better. Please complete all parts of this form and return it to our office at 60 Central Avenue, Cortland, NY 13045. Thank you.

General Information

Name (Last)	(First)	(Middle)	Date of application
Present address (street, city, state, zip code)		Phone no. (daytime)	Phone no. (evening)

E-mail address

Do you possess a valid NYS driver's license? yes no

Have you ever been convicted of a crime? yes no *If so, please explain.*
A criminal conviction will be considered only in relation to the position for which you are applying. Seriousness and nature of the offense, time elapsed, and rehabilitation will be taken into account.

Volunteer Position

Position(s) of interest *(If not sure, leave blank)* Audience age level preference

Dates, days, and times available Time commitment desired

Where did you learn about this opportunity?

Cornell Cooperative Extension associations provide equal program and employment opportunities. No person shall be denied on the basis of any legally prohibited discrimination involving, but not limited to, such factors as race, color, creed, religion, national or ethnic origin, sex, sexual orientation, age, or qualified disability.

Volunteer Employed Experience

Organization/Employer

Position Title/Major Responsibility

From mo/yr to mo/yr

Other Relevant Experience

Describe any relevant education or training you have had which you feel is related to the position for which you are interested. Also describe any special educational skills, experiences or interests along with organizations, honors, certifications, licenses, publications etc. you consider relevant.

References

List at least two persons, other than relatives, who are familiar with your character and have knowledge of your qualifications.

Name	Title	Mailing Address	Telephone
			Home: Work:
			Home: Work:
			Home: Work:

I hereby affirm that the statements made on this application are true. I understand that misrepresentation or omission of facts requested is cause for non-appointment as a Cornell Cooperative Extension volunteer. I authorize Cornell Cooperative Extension of Cortland County to contact listed references and employers and understand that references contacted will not necessarily be limited to those indicated on this form. If appointed as a volunteer, I agree to adhere to the general policies and guidelines set forth by Cornell Cooperative Extension of Cortland County and to fulfill my assigned volunteer responsibilities to the best of my ability. I realize that this is a non-paid volunteer position.

Signature

Date

For Office Use:

Date Received _____

Position of Interest _____

Staff responsible for processing application _____

Date references checked _____

Date applicant interviewed _____

Outcome:

Volunteer position accepted _____

Starting Date _____

Staff Supervisor _____