



## **Military Teen Leadership Summit Adult Leader Application and Criteria**

Thank you for your interest in volunteering as an Adult Leader at a 2021 Military Teen Leadership Summit(s). We do not want to discourage anyone from applying; however, we want to make everyone aware of the conditions of each summit. Please read below for criteria concerning adult leaders.

## **Joint Reserve Component Summit and Islands Military Teen Leadership Summit**

These 2 Summits are for teens whose parents currently serve or are retired from any branch of the military. A focus of the summit is providing supports and connections for reserve component military teens. This Summit is centered on leadership workshops, outdoor adventure and environmental education; if you are an inside person, this volunteer role is not for you.

Camp staff will teach outdoor education classes and oversee high adventure activities. However, Adults will be asked to lead small mentoring sessions, assist in workshops, flag raising/lowering, and serve as chaperones on buses during travel to/from activities.

For your job as an Adult Leader, you must be available 24/7 during the camp and willing to do the following:

- be part of the “airport” team: meeting teens at the airport on the first day of camp and taking teens to the airport on the last day of camp
- chaperone teens in your assigned cabin
- participate in all activities – white water rafting, high ropes, hiking, swimming, etc. ...
- be willing to perform night duty in the middle of the night
- oversee kitchen duty, night recreation, sports activities
- much, much more!
- follow all Georgia 4-H Risk Management practices
- role model positive behaviors

## **Application Process**

You must have your supervisor’s support and approval to apply as an Adult Leader. We will cover airfare, lodging and meal expenses. Travel to and from the airport is your responsibility. However, we do provide transportation from the airport to camp. Information on flights and transportation to camp will be finalized about a month prior to camp.

For each Summit you will be required to arrive one day prior to the beginning of the Summit. This gives everyone time to settle in at the camp, meet other leaders and staff, and attend the mandatory adult leader training.





Interested adults (**ages 21+**) should complete all forms with a wet or digital signature to be considered. Forms can be submitted with Adobe Reader/Phantom PDF, scanned, and emailed to [milcamps@uga.edu](mailto:milcamps@uga.edu).

All adult leaders will be subject to a background check. Former and new adult volunteers will all go through the full screening process.

**Forms to be submitted:**

- Adult Leader Application
- UGA Application for Screening
- UGA Consent for a Background Investigation
- UGA Volunteer Agreement

Download the newest Phantom PDF for free. This will allow you to fill out the required forms at ease. Direct any questions to Laura Goss or a Military Camps Program Assistant at [milcamps@uga.edu](mailto:milcamps@uga.edu) or (706) 542-4444.

**13 JAN** Adult Applications Open

**3 May** Applications Closes. All Paperwork Due to allow time for background investigation particularly for Joint. We will continue to accept past 3 May as needed per camp.

**2021 Camp Dates (include adult arrival day pre camp)**

May 29-June 4, 2021, WAHSEGA; Joint Reserve Component Teen Leadership Summit

June 12-June 18, 2021, JEKYL; Islands Military Teen Leadership Summit

**\*\*Note, applications for adult leaders will be on a semi-rolling process**

**\*\*Note, camp dates provided include the adult volunteer arrival day**

All pages must be submitted to The University of Georgia 4-H to [milcamps@uga.edu](mailto:milcamps@uga.edu). Call (706) 542-4444 or email Laura Goss or Marilyn Huff-Waller with questions.





Name:

Primary E-mail: Address:

Phone:

T-Shirt Size:

Allergies or Diet Restrictions:

Emergency Contact Information

Which Military Teen Summit(s) are you willing to serve as a volunteer? Dates include volunteer arrival day in addition to camping week dates.

- May 29-June 4, 2021, WAHSEGA; Joint Reserve Component Teen Leadership Summit June 12-18,
- JEKYLL; Islands Military Teen Leadership Summit
- I would love to attend both

\*If you indicated interest in multiple camps and can only attend one? What camp do you prefer to attend?

I understand that I will be financially responsible for my travel to/from the closest major airport and I may be responsible should I cancel my participation after airfare has been reserved.

Do you have a teen applying to attend a summit you wish to volunteer at? If so, please list teen's name(s):





**Military Information:** Are you a current military member or DoD civilian? If so, please complete information below, so we can write a letter to supervisor/commander to show our gratitude.

Service Branch and Unit:

Supervisor's Name and Email:

Commanders Name:

Unit Address City, State, Zip:

Why would you like to volunteer as an adult leader at a Teen Summit?

**Knowledge, Skills, & Abilities:**

Do you have experience working with youth and/or working at the Teen Leadership Summits? If yes, please explain:





How did you find out about volunteering at a Teen Leadership Summit?

If you have volunteered before, which camps did you volunteer at?



[georgia4h.org](http://georgia4h.org) | 1-800-ASK-UGA1  
The University of Georgia 4-H program is the largest youth leadership organization in the state.  
An Equal Opportunity, Affirmative Action, Veteran, Disability Institution

# SCREENING APPLICATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Information Collected for Reporting Purposes Only:

Birthdate:	Gender:
Race (select all that apply): <input type="checkbox"/> White <input type="checkbox"/> African American or Black <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	Residence (select one): <input type="checkbox"/> Farm <input type="checkbox"/> Rural (Under 10,000) <input type="checkbox"/> Town (10,000 – 50,000) <input type="checkbox"/> Suburban (50,000+) <input type="checkbox"/> City (50,000+)
	Check all that apply: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Military Family

### Contact Information:

Phone:	Work Phone:
Cell Phone:	Email:

**References:** Provide 3 references who are not immediate family members and who reside outside of your home address. They should be familiar with your skills and abilities related to potential duties associated with volunteering. Local CAES or Extension staff should not serve as references.

Name of Reference:	Title:	Company:	Phone No:
Address:			Email:
How do you know this reference?		How long have you known this reference?	

Name of Reference:	Title:	Company:	Phone No:
Address:			Email:
How do you know this reference?		How long have you known this reference?	

Name of Reference:	Title:	Company:	Phone No:
Address:			Email:
How do you know this reference?		How long have you known this reference?	

Thank you for your interest in serving with UGA CAES and Extension! Please look over your application prior to submitting it to your local office to ensure you are leaving no required boxes or blanks empty.



## The University of Georgia Cooperative Extension Volunteer Agreement

Thank you for agreeing to volunteer with the University of Georgia Cooperative Extension program. In signing this agreement you are confirming your acceptance for a volunteer role.

1. I agree to serve as a volunteer with UGA under the primary direction of State 4-H Office Cooperative Extension. (*fill in county or unit name*) I understand that if my role involves supervising youth, I will be required to complete a UGA background check and that some duties may include additional training and orientation.
2. I agree that my participation in the activities outlined in the attached General Description of Volunteer Duties (which is part of this agreement) is not in exchange for any consideration (e.g., pay, benefits, the promise of future employment). I acknowledge that, in exchange for my service as a volunteer, I have neither been promised any consideration nor do I expect to receive any consideration. I understand that additional duties may be assigned or the specific duties be expanded but the general description will be the same.
3. I agree that as a volunteer I am under the primary direction of the unit, county office or department but may be asked to participate in activities that include direction from others within Cooperative Extension and/or other departments in the University of Georgia.
4. I agree that, as a volunteer, I will not be acting as a UGA employee or student. I understand and agree that UGA and I both have the right to end my volunteer relationship with UGA at any time, for any reason, and without advance notice.
5. I understand that UGA is self-insured through the Department of Administrative Services against state tort claims. This coverage is provided for volunteers in programs organized, controlled and directed by UGA for the purposes of carrying out the functions of UGA. **I UNDERSTAND THAT COVERAGE DOES NOT APPLY WHEN I DEVIATE FROM THE COURSE OF MY VOLUNTEER DUTIES.**
6. I understand that, as a volunteer, I will not be entitled to any employee benefits unless I am an employee of the University of Georgia; as an employee, I understand that I am entitled to my employee elected benefits. I understand that UGA may not provide me with any accident or medical insurance, and therefore may not be responsible for any accident or medical expenses that I incur in the course of volunteering. I also understand that I am not covered by workers' compensation laws in connection with my volunteer affiliation. If I utilize my personal vehicle, I understand that UGA does not provide comprehensive or collision insurance for my personal vehicle.
7. I understand that if my duties involve youth work, I am required to abide by the UGA Cooperative Extension Behavior Guidelines for Adults working with Youth and may be discharged from my duties as a volunteer should I fail to follow these expectations. These guidelines are printed on the reverse of this page and are initialed by me.
8. I understand that my participation as a volunteer may involve certain risks In addition; I understand that I may be exposed to other risks which may not be foreseeable. I voluntarily accept these risks.
9. I agree to abide by all applicable rules and regulations of UGA and any of the department or units where I engage in volunteer activities. I also agree not to disclose any confidential information concerning youth program participants, research subjects, unpublished research data, and other confidential information of which I may learn in the course of my volunteer service. I acknowledge and agree that any intellectual property I may create in the course of my activities at UGA shall be the property of UGA.

Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Volunteer's Printed Name \_\_\_\_\_ Volunteer's Phone# \_\_\_\_\_

Volunteer's Address \_\_\_\_\_

Volunteer's Email Address \_\_\_\_\_

Extension Faculty Printed Name Laura Goss Extension Faculty Signature Laura Goss

Primary Extension Office location: 319 Hoke Smith Annex, Athens, GA 30602 Date \_\_\_\_\_

# Adult Behavior Guidelines when Working with Youth



The University of Georgia Cooperative Extension program establishes the following guidelines for adults working with youth in programming. These are general behavioral expectations for any adult including both paid staff and volunteers working or volunteering in a capacity which includes working with children under the age of eighteen and/or youth considered program participants.

Adults are expected to:

- Work cooperatively with youth, families, University of Georgia faculty, staff, volunteers, community members and others in a courteous, respectful manner demonstrating behaviors appropriate for a positive role model.
- Represent the University College of Agricultural and Environmental Sciences' Cooperative Extension programs with pride and dignity, behave appropriately, exhibit good sportsmanship, and demonstrate reasonable conflict management skills.
- Respect, adhere, and enforce the 4-H Code of Conduct as well as other rules, policies and guidelines established by the UGA CAES Cooperative Extension and event coordinators including state laws and regulations.
- Recognize that physical punishment is not an appropriate form of discipline and will not be allowed. Physical punishment includes physical actions that may not be expected of an individual during the program and are assigned to a young person as a consequence for misbehavior.
- Recognize that verbal abuse, physical abuse or committing criminal acts may be grounds for termination as an Extension volunteer. Abusive behavior towards youth or other adults including failure to provide adequate health and safety measures, care or supervision, emotional maltreatment of members, verbal or physical abuse will not be tolerated.
- Under Georgia law, report any mistreatment of youth to the proper authorities. Adults should immediately contact the person coordinating the Extension program/event and/or police or child welfare authorities if the adult believes a child is being abused. Failure to report child abuse is grounds for criminal charges.
- Comply with equal opportunity and anti-discrimination policy and governmental laws. Make all reasonable efforts to assure that Extension youth programs are accessible to youth without regard to race, color, national origin, gender, religion, age, sexual orientation or disability.
- Treat animals humanely and encourage youth and adults to provide appropriate and ethical care.
- Strive for a minimum of two adults at any activity involving youth. Adults, in most cases, should not be left alone with a single child unless the adult is the parent/guardian of that child.
- To be housed in overnight settings in separate sleeping areas from children when possible. When this is not possible, parent/guardians should be furnished a letter explaining the situation and informing the parent/guardian that his/her child will be housed with an adult in the same room.
- Under no circumstances, to condone others use of or personally consume alcoholic beverages or illegal drugs during Extension youth programs, events and/or activities.
- Operate machinery, vehicles, and other equipment in a safe and responsible manner.
- Accept responsibility to promote, conduct, and support 4-H in order to develop an effective local, county, district and state program.
- Recognize the following behaviors are inappropriate and will not be tolerated in the presence of youth during Extension youth activities or events:
  - consumption of alcohol
  - promotion of religious or political preferences
  - theft, pilfering, or fraud
  - use of tobacco products outside of designated areas
  - sexual advances or activities involving youth
  - willful damaging of property
  - permitting passengers to ride in motor vehicles without seatbelts
  - permitting youth or adults in the back of trucks
  - behaviors that are illegal under law

I have reviewed and understand the Adult Behavior Guidelines.

\_\_\_\_\_  
Volunteer's Initials

\_\_\_\_\_  
Date