



4-H CHAPERONE INFORMATION FORM
Outagamie County 4-H Program



Year Applying \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

4-H Club \_\_\_\_\_ T-shirt size \_\_\_\_\_

Email \_\_\_\_\_

Which opportunity are you applying to be a chaperone for?

[ ] State 4-H Opportunities\* (Citizenship Washington Focus, National 4-H Congress, Space Camp, American Spirit, WI 4-H & Youth Conference, International Programs). Please list which trip you are applying for: \_\_\_\_\_

[ ] State Fair\*

[ ] Explore Wisconsin [ ] Other (please list) \_\_\_\_\_

\*Please note that you must also apply online for state trips at https://fyi.extension.wisc.edu/wi4hedopp/adult-advisors/ and for state fair at http://www.wistatefair.com/pdfs/competitions/entry\_info/Volunteer\_Adult\_Contact\_Application.pdf. Refer to these websites for application deadline dates.

How long have you been involved with 4-H? \_\_\_\_\_

Please describe your involvement with 4-H: \_\_\_\_\_

Please describe any experiences you have chaperoning youth: \_\_\_\_\_

Do you have a valid driver's license? [ ] yes [ ] no

Have you completed the county youth protection orientation? [ ] yes [ ] no

Are you certified in First Aid? [ ] yes [ ] no If no, are you willing to get certified? [ ] yes [ ] no

Are you certified in CPR? [ ] yes [ ] no If no, are you willing to get certified? [ ] yes [ ] no

Do you have any health problems? [ ] yes [ ] no

If yes, please explain \_\_\_\_\_

Why do you wish to participate as a chaperone for this program? \_\_\_\_\_

I have read the attached Expectation Statement, and agree to abide by all expectations.

Signature of Adult

Date

Please return to Outagamie Extension: Attn: Chaperones, 3365 W. Brewster St., Appleton, WI 54914 by Feb 1. \*Refer to websites above for application deadline dates.

## EXPECTATION STATEMENT FOR ADULTS ACCOMPANYING 4-H YOUTH ON EXTENSION SPONSORED TRIPS AND EVENTS

Capable, caring adults play important roles in the lives of youth involved in 4-H Youth Development Programs. This expectation statement acknowledges the need to provide the safest environments possible for youth.

This form applies to all adults, paid staff and volunteers, accompanying 4-H youth on an Extension sponsored trip or event. The adult, by signing this form, agrees to conduct herself/himself in a responsible manner and abide by all expectations as stated below.

### Adult Responsibilities

1. The adult shall consider herself/himself the 4-H youths' support person.
2. The adult will enforce all written and signed behavior expectations established for 4-H youth participation in the event. This will include room checks, when appropriate.
3. The adult will keep health and insurance information available as may be needed in handling emergency situations.
4. The adult will not dispense medication, or anything relating to the physical or mental health of the 4-H youth, unless specifically directed in writing by the parent or guardian. The adult should be aware of all medications to be taken by 4-H youth.
5. In an emergency situation, the adult will act in the best interest of the 4-H youth. Seek assistance from event coordinator, professional staff, medical and/or law enforcement personnel as needed.
6. The adult should provide the 4-H youth with information on how they can be reached, and should be accessible to consult with 4-H youth participants when needed.
7. In the case of inappropriate 4-H youth behavior, the adult shall consult with local and/or home county contacts in determining appropriate disciplinary action.
8. The accompanying adult will participate in assigned activities and assist with arrangements as needed.
9. The use of illegal drugs is not allowed during the entire trip or event.
10. The possession and/or use of alcohol is not allowed during the entire trip or event.
11. The use of any form of tobacco should be avoided in the obvious or known presence of 4-H youth.
12. Sexual contact of any type with 4-H youth is strictly forbidden. Any behavior considered in violation of the Wisconsin child abuse and sexual assault laws can be grounds for suspension of 4-H affiliation until investigation is completed.
13. Swearing, cursing and abusive language is not condoned.
14. Operate motor vehicles (including machines or equipment) in a safe and reliable manner when working with 4-H youth, only with a valid operator's license and the legally required insurance coverage.
15. The adult must have participated in the county youth protection orientation.

### Enforcement

- Allegations should be put in writing and signed. The person or group responsible should investigate the charge to determine what action is needed.
- The Executive Committee of the State 4-H Adult and Youth Leader Councils will determine action for failure to meet the expectations for state sponsored events/activities for volunteer staff.
- The County 4-H Leader Association Boards will determine action for failure to meet the expectations of county sponsored events/activities for volunteer staff.
- The County Office Chair will receive complaints and determine action for county staff.
- The State 4-H Program Leader will receive complaints and determine action for state staff.

### Support Available to Adults Accompanying 4-H Youth on UW-Extension sponsored Trips/Activities

1. Orientation will be provided.
2. Youth taking part in overnight activities will submit a signed agreement that they understand the rules and the roles of the accompanying adult(s). Youth will be asked to submit a health form that includes information on any special needs, medication taken, and how to contact a parent or guardian.