NC COOPERATIVE



NC STATE

4-H Online Volunteer Guide

North Carolina 4-H depends on the caring adult volunteers who are willing to offer their time and talents to make a difference!

ADULT VOLUNTEER TYPES

When entering your club you must choose a volunteer type. "Administrative Leader" will be the volunteer type for the overall leader of the club. Other volunteer types include Project Leader, Activity Volunteer, Resource Volunteer, Mentor and Episodic Volunteer. See the full description of each volunteer type below.

<u>Administrative Leader</u> - Individuals who have completed the volunteer application process and are screened and trained volunteers who provide overall leadership to a club or group. They are responsible for the organization of the project groups within the club or group. They may also be known as General or Club Leader.

<u>Project Leader</u> - Individuals who have completed the volunteer application process and are screened and trained volunteers who provide on-going leadership to a project within a club or group. It is possible for a club to have more than one project leader per project. These volunteer leaders provide support to members enrolled in specific project.

<u>Activity Volunteer</u> - Individuals who have completed the volunteer application process and are screened and trained volunteers who provide leadership or assist with an activity or variety of activities in the 4-H program. They may work independently or with a club, council, group or committee to carry out an activity.

<u>Episodic Volunteers</u> - Individuals who assist the 4-H program through their efforts. These may include instructors, judges, committee members, industry representatives, etc. These individuals may not serve as chaperones or be left unattended with members.

YOUTH VOLUNTEER TYPES

Teen Leader - Youth between the ages of 13-20 years old who, in cooperation with 4-H staff and their administrative or project leader, are learning and developing leadership skills through various 4-H activities and projects.



Enrolling in 4HOnline as a NEW Adult Volunteer

Your County Extension staff can assist you with beginning the Adult Volunteer enrollment process in 4HOnline, the preferred method of enrollment, or provide you with a paper enrollment form. To enroll in North Carolina 4-H through the 4HOnline data management system, you need a computer, tablet or smartphone, internet access, a valid e-mail address and a web browser.

- 1. Go to https://nc.4honline.com (notice there's no "www" in that address).
- Click "I need to set up a profile". A drop down menu will appear. Select the county of your assigned 4-H volunteer duties, then type in your valid family e-mail address.
 *E-mail addresses must be valid in order for you to have access to your enrollment information it's your account login as well as how you receive information.
- 3. Confirm your e-mail address.
- 4. Type in your household's last name. (This will be the name that appears on mailing labels—"The Johnson Family" for example.)
- 5. Create your password must include letters and numbers/symbols with a minimum of 8 characters.
- 6. In the Role field select Family.
- 7. Click on "Create Login"

0	I have a profile
۲	I need to setup a profile
0	I forgot my password
Are you in a Military 4-H Club:	
County:	Training
Email:	cloverpower@noemail.com
Confirm Email:	cloverpower@noemail.com
Last Name:	Clover
Password:	Min. of 8 characters, at least 1 number and 1 capital or non-alpha
Confirm Password:	•••••
Role:	Family 🗘
	Create Login

To move between boxes, you need to use your mouse or the TAB key. Don't press the ENTER key or click on the BACK ARROW – you will lose any information that you have entered.

This is the Family Information page. Fill in requested information correctly and completely. All fields in BOLD are required information.

- Make sure that you choose your correspondence preference to either "Mail" or "Email". If you choose Mail as your correspondence preference, then most of your correspondence with your County Cooperative Extension Office will come via the US postal service. If you choose Email as your correspondence method, then most of your communications from the County Cooperative Extension Office will be through Email.
- Do not check the "update member records" box at this time.
- You do not need to complete the Password Management section as this time. You have already created your 4HOnline password on the Login Page.
- Click on the "Continue" button at the bottom of the page.

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Credit Cards Email History	Family	Family Settings	Login History			
	Fa	amily Informa	tion			
		Profile Information	n		 Required Fields 	
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•1	ast Name	Clover				
• Mailing	Address	Box 7655				
	• City	Raleigh				
	• State	(itortir ouronnu		\$		
	Zip Code				12345	
		919-515-8466			555-555-1234	
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		Please double-ch selection	eck your County			
Update member records with						
	address					
		assword Managen	nent			
	Password					
	Password					
Confirm New	Password					
		Update Passwo	ord			
		Continue >>				
Delete Family						
Only delete a family if they will neve	er return.					

Henlinest and Event Registration	North Carolina 4-H	H Youth Development		(+ Log
Logged in as 🚢 Clover			🕷 Home 🗐 My M	fember L
	Mem	iber List		
	Mer	mber List		
Member Types				
Adults: 4-H volunteers, both direct and	d resource. Parents do not e	mol as adults unless they are active 4-	H volunteers.	
Contact: Adults who are NOT active v	olunteers, non-members or g	guests, and youth younger than cloverbi	ud age (5-8).	
Contact: Adults who are NOT active v Youth: 4-H members between the age				ogram.
Youth: 4-H members between the age	is of 9 and 18 and 4-H clover	rbuds between the ages of 5 and 8 who	are involved in a 4-H pr	
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North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, veteran status or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.

You are now at the "Member List" page.

• In the drop down box under "Add a New Family Member", select "Adult" and click on "Add Member".

This is the "Adult Personal Information" screen. Fill in all information for this member correctly and completely.

- If you have a DIFFERENT e-mail address than the family one entered at login, enter it in the Email box.
- If your last name is different than the household name, make that change on this page.
- Complete each field in **BOLD**. These are required fields.
- **Text messaging**: This is optional. Enter your cell phone number, check the box if you are willing to receive text messages via 4HOnline, and choose your cellular provider from the list.
- Are you a volunteer? Mark "yes" if you are a screened and approved 4-H Adult Volunteer.
- Ethnicity if you consider yourself to be a part of the Hispanic culture, mark "yes".
- Race You may choose as many of the options that apply or mark "prefer not to state". The choice is yours.
- Choose your residence.
- Complete the Military Service of Family only if it applies.

4H@nline North Ca	rolina 4-H Youth Development	🕒 Logout	Volunteer
-H Errollnest and Event Registration	61	Home 🖃 My Member List	Select "Yes" if you serve in a leadership capacity in 4-H. Examples for youth: Junior Leader, Club Officer, etc. Examples for adult: Chapercone, Community Club Leader, Project Leader, etc.
Enrollment			Are you a Volunteer?; No: ◎ Yes: ●
			Ethnicity
Persor			Are you of Hispanic or Latino ethnicity? No Yes
	tion Information Personal Information		Race
Aduit	Profile Information	• Required Fields	Check all the races that apply to you. If you selected "Not Hispanic", you must select at least one option.
Emai	I: nc4hvolunteers@gmail.com	joe@4honline.com	White: 🗹
• First Name	Mrs.]	Black or African American:
Middle Name			American Indian or Alaskan Native:
• Last Name	Clover		Native Hawaiian or Pacific Islander:
Suffix	c		Asian:
Preferred Name			Balance (other combinations):
 Mailing Address 	1101 Clover Way	j	Residence
Mailing Address 2	2]	Farm:
• City	/: Raleigh]	Town under 10.000 and rural non-farm:
• State	North Carolina 🗘)	Town/City 10,000 - 50,000 and its suburbs:
• Zip Code	27695-0001	12345	Suburb of city more than 50,000:
• Gender	Select gender \$)	Central city more than 50,000:
• Primary Phone	919-555-8440	555-555-1234	Military Service of Family
Cell Phone	a:	555-555-1234	
You wish to receive notices via tex	t 🗉 @ Select your provider 🗘)	Family Member Military Service: No one in my family is serving in th
message Work Phone		555-555-1234	Branch of Service:
• Years in 4-H		#	Branch Component:
Emergency Contact Name]	
• Emergency Contact Phone		555-555-1234	Continue >>
Emergency Contact Cell Phone	919-555-8441	555-555-1234	
		1	
Emergency Contact Relationship	Spouse		

• When you have completed this page, click "Continue." This brings you to the Additional Information Page.

Page 5

This is the "Additional Information" screen. Fill in all information for this member correctly and completely.

- All fields are required. Select an option if there is a choice, or check the "I agree..." box.
- The authorization sections include NC 4-H Volunteer Standards of Behavior, Volunteer Screening Reference Check Authorization, and the Volunteer Waiver, Release, Hold Harmless, Indemnification and Media Release Agreement.
- By logging on with your login email address and password, you are indicating that you are the correct person to agree to the terms
- When you have completed this page, click "Continue."

Enrollment Member Settings	Volunteer Screening Reference Check Authorization	n
Personal Information Additional Health Form Volunteer Information Additional Information	I authorize contacting the listed references, previous employers, and volunteer organizations. I under misrepresentation of information requested is just cause for non-appointment or dismissal as a 4-H vo volunteer. I agree to abide by the policies of the North Carolina Cooperative Extension and the North C my volunteer responsibilities to the best of my ability. I hereby authorize the 4-H agent or authorized representative of the organization bearing this applicabilities and the North C authorize the 4-H agent or authorized representative of the organization bearing this applicabilities to the set of my ability.	lunteer. If appointed as a Carolina 4-H Program and to fulfi
	information pertaining to my background for the sole use of obtaining a criminal and traffic violation ba- to a criminal and traffic violation background check.	
NC 4-H Volunteer Standards of Behavior	Yes, lagree 🛛	REQUIRED
	Member Signature	REQUIRED
North Carolina 4-H Volunteer Standards Of Behavior	Parent/Guardian Signature	REQUIRE
ramiles and other yourn-serving organizations place trust in vorm Carolina Cooperative Extension to provide quarity leadership and sare for participants in 4-H programs. The opportunity to work with youth is a privileged position of trust that should only be held by hose who are willing to commit to upholding behavior that fulfills this trust. For these reasons, the following behavior guidelines are rovided for volunteers working in the North Carolina Cooperative Extension 4-H program.	Volunteer Waiver, Release, Hold Harmless, Indemnification, and Media	Release Agreement
 Treat others in a courteous, respectful manner demonstrating behaviors appropriate for a positive role model for youth. Obey the laws of the locality, state and nation. Make all reasonable efforts to assure that 4-H youth programs are accessible to youth without regard to race, color, national origin, relign, sex, age, cliability or political affiliation, and promote a spirit of positive . Recognize that verbal and/or physical abuse and/or neglect of youth is unacceptable in 4-H youth programs, and report suspected abuse to 4-H officials or the proper authorities. Do not participate in or condone neglect or abuse which happens outside the program to 4-H youth participants, and report suspected abuse to the proper authorities. 	I have agreed to serve as a volunteer for the NC Cooperative Extension, 4-H Program, and NC State, participation is a privilege afforded to me by the NC Cooperative Extension, 4-H Program, and NC State and assume all of the risks associated with my volunteer duites. I do hereby affirm and acknowledge the inherent hazards and risks associated with my volunteering, including property damage, falls, cont vehicle accidents, stings, bites, scratches, exposure to wildlife and nature, and other personal injuries. known and unknown, involved to me and my property in the volunteractivity, and tam voluntarily par judgment and knowledge of my experience and capabilities, and medical or other conditions. In conside participate, I hereby agree to the following:	te. I fully understand, appreciate hat I have been fully informed of act with other participants, moto I accept and assume all risks, ticipating in reliance upon my of
 Operate motor vehicles (including machines or equipment) in a safe and reliable manner and only with a valid operator's license and the legally required insurance coverage. Inform county 4-H staff of any arrests or charges of oriminal activity. (Temporary suspension pending resolution of the case may be required.) Notify Extension staff promptly of any incident which may violate 4-H policies or personal rights. Do not required 4-H participants to purchase materials, supplies, equipment, animals or services from any specific vendor. Tech 4-H youth to provide appropriate animal care and freat animals humanely. Do not consume alcohol or illegal substances while responsible for youth in 4-H activities nor allow 4-H youth participants under supervision to do so. 	I voluntarily waive, release and hold harmless NC Cooperative Extension, 4-H Program, and NC State employees, agents and other volunteers from any and all claims, causes of action and damages for bo suffer as a result of, or in any manner, directly or indirectly, connected with or proximately caused by n understand that this waiver and release precludes my right to recovery of damages in the event I am it volunteer duiles or activities. I understand that first aid may be available on site, and if injury occurs, n sought. I hereby grant my permission for medical providers to conduct such diagnostic, therapeutic, ar deemed necessary for me. A photocopy of this permission is to be considered wild as the original. I for any medical care provided is my responsibility and will be paid by me and/or covered by my insura	odily injury or death that I may ny participation as a volunteer. I njured in the course of performin nedical and/or hospital care will nd operative procedures as further understand that treatmer
12. Accept supervision and support from county, district, and state 4-H staff while involved in the 4-H program.	I shall defend, hold harmless and indemnify NC Cooperative Extension, 4-H Program, and NC State, i employees, agents and other volunteers, from and against all damages, claims, liabilities, causes of a costs and expenses (including, but not limited to, reasonable expert witness and attorney fees) that m by any person as a result of bodily injury, death or property damage, or as a result of any other claim or whatscever, anising from or in any manner connected with, directly or indirectly, my acts or omissions i	ction, judgments, settlements, ay at any time arise or be claim or cause of action of any nature
/olunteers are asked to carefully consider the following expectations and confirm a willingness to observe these by signing where ndicated. In addition, adults serving as volunteers can expect the following from the North Carolina Cooperative Extension (NCCE).	NC Cooperative Extension, 4-H Program, or NC State. I do hereby agree to be photographed, audio or videotaped by the NC Cooperative Extension, 4-H Pro	
NCCE AGREES TO: Provide orientation training for the position. Set educational tone and directions. Provide obsciptions.	agree that my image or likeness in photographs, videos, or audio may be used for educational or prom posting on the Internet. I agree that the use herein may be without compensation to me. I hereby waik the finished electronic, photograph, or printed matter that may be used in conjunction with them novo releasing NC Cooperative Extension, 4-H Program, and NC State, its agents, employees, licensees ar which I may have for invasion of privacy, right of publicity, defamation, copyright infringement, or any the use, adaptation, reproduction, distribution, broadcast or exhibition of such recordings.	ve any right to inspect or approv r in the future. I am expressly nd assigns from any and all clair
Provide assistance, support and encouragement. Give recognition for time and energy devoted to the job. Inform of coming events and activities. Make annual evaluations. Provide evaluations and materials to develop understanding and management of the volunteer assignments. Provide deviational materials to be used for project and club organizations.	I understand this is a legal document which is binding upon me, my heirs and assigns and on those wi am eighteen (18) years of age or older, and have full capacity to enter into this agreement and do so v under the age of 18 the parent / guardian must agree.	
 Provide timely information on events, programs, and opportunities for youth at the county, state, and national levels. <u>VOLUNTEER AGREES TO:</u> 	I have read, fully understand and agree to the assumption of risk, waiver, release, hold harmles forth above.	ss and indemnification terms
Be supportive of Extension programs and staff members. Participate in County Leader Association meetings and training as appropriate.	I agree to photo/media use for any public release	
Inform enrolled youth of Extension program opportunities. Supply County Extension Office with application updates annually. Abid on Work County and Abid Section an	I do not agree to photo/media use for any public	
 Abide by the North Carolina 4-H Volunteer Standard of Behavior. Participate in available training as appropriate to fulfill my dudes. Watch Child Abuse and Reporting Video (URL): https://www.youtube.com/watch?v=C\$Jnqk0Yrgo&feature=em-upload_owner 	release by NC State T-Shirt Size: [Youth Large	*
Yes, I agree 🗌 REQUIRED	<< Previous Continue >>	
Member Signature REQUIRED		

Health Form

- All fields are required as appropriate.
- Fill out completely.
- When you have completed this page, click "Continue."

ogged in as 📥 Clover: Test	🏶 Home 🚍 My Member
Enrollment Member Settings	
Personal Additiona Information Informatio	Bealth Form Volunteer Participation n Bicreaning
	Health Form
This person takes medications on a routine basis	
Yes	
	•
Medication(s) - Name, Reason, Dosage, Time Taken:	
Known allergies to foods, drugs, insect stings or bites, etc:	
Date of Birth (DOB):	
	hother any of the following medical conditions apply
	hether any of the following medical conditions apply.
Nervous or Mental - including Epilepsy, emotional stress, convulsion, loss of consciousness, dizziness, paralysis, frequent anxiety, excessive crying:	
Lung Disease - Asthma, cough, TB:	0
Heart Disease - abnormal BP, heart ailment:	8
Chest pain, shortness of breath - heart murmur, rheumatic fever:	
Stomach or Intestinal conditions, ulcers, gall blader, liver disorder, colitics, hernia:	
Arthritis, diabetes, kidney, bladder disease:	8
Hay fever, season allergies:	
Impaired hearing:	
Wear glasses or contacts:	8
Allergies to bee stings, insect bites:	
Allergies to medications: If you answered "yes" to any of the previous health	
questions please explain:	
Do you have any additional medical conditions not listed above that we should be aware of - if so please explain::	
Date of last flu shot:	
Date of last tetanus shot:	
Name and Phone number of physician:	
<< F	Previous Continue >>

Volunteer Screening

- All fields are required as appropriate.
- Fill out completely.
- When you have completed this page, click "Continue."

	Drivers Licenses #, State and Expiration date. *If
ATT C TA North Configuration of the second	none, type "none.":
A Ligout North Carolina 4-H Youth Development 🕒 Logout	Have you ever received a traffic violation, if so
	please explain. * If none type "none".:
4-H Enrollment and Event Registration	
Logged in as & Clover: Mrs. #Home [My Member List	Employment History: Current Occupation,
Logged in as a clover, mrs. Whome List	Employer, City & State
Enrollment Member Settings	
	Employment History - Previous 7 years:
	Occupation, Employer, City and State, years of
	employeet:
Personal Additional Health Volunteer Participation	
Information Information Form Screening	Name of last school attended or currently
	attending, city & state:
Volunteer Screening	
	Did you graduate?
Background Check	Yes, I did 🛞
	No, I didn't 💿
I understand that my participation as a	I received a GED 🔘
volunteer is dependent on the results of	Education Beyond High School: Colleges, technical,
my background check.	trade-schools attended, City & State, Degree:
Yes 🔘	indue-schools alterided, only & State, Degree.
No (i)	
	References: Please list three persons, not related
Volunteer Screening	to you, who have knowledge and have known you
	for at least two years. Please provide complete
Have you been a 4-H volunteer before?	addresses, phone numbers, email address and
Yes, I have been a volunteer.	their relationship to you.
	Social Security numbers are collected for the sole
No, I have not been a volunteer.	purpose of conducting background clearances.
Why are you interested in being a 4-H	Providing the information is optional, however, for
volunteer?:	those volunteer positions that require a criminal
	background check (4-H Club Leader, Volunteers who
	transport youth, chaperoning overnight events,
Have you ever worked with youth before,	Managers of 4-H Club / Group Accounts, etc.) this
please explain briefly.:	information is necessary for program participation.
picase explain briefly.	*Please use the URL to download the Volunteer
	Background Screening Form and return it to your
	local 4-H agent.
What time commitment are you	None 💿
considering?	At this time, I agree to provide my social security
Are you a 4-H alumnus?	number
Yes, I am a 4-H Alumnus 🔘	At this time, I do NOT agree to provide my social
	security number. I understand my volunteer III
Yes, I am a current 4-H Member	participation may be limited.
No, I am not a 4-H Aumnus or current 4-H	
Member 🔍	Please download the Volunteer Background Check Form here:
If yes, where were you a 4-H member? City /	
State:	
	https://no4h.ces.ncsu.edu/wp-content/uploads/2018/03/VOLUNTEER-SCREENING.pdf
Do you have access to a car?	
Yes, I do 💿	
No, I don't 🔘	<< Previous Continue >>

• If volunteers select to provide their Social Security Number, they will need to download the Volunteer Background Check Form, fill it out and return it to you. The link is provided on this page.

The Clubs/Projects/Groups page is where you will select a 4-H club and projects for the current 4-H year.

- If you are a 4-H Club Volunteer, select the appropriate club from the list.
- Be sure to click "Add Club".
- Add additional clubs if you have 4-H Club Volunteer responsibilities for more than one club.
- Click the "Continue" button.
- If you are not a 4-H Club Volunteer, click the "Continue" button.

The "Projects" tab.

- If you are a Project Leader/Volunteer under "Select a Project" click on the drop down menu and select the first project for which you have 4-H Adult Volunteer responsibilities.
- "Years in Project" Select the number of years you have been a project leader for this project.
- Select your role as a Volunteer for this Project
- Click on "Add Project".
- For each additional project that you are a volunteer, repeat the steps above.
- If you are not a Project Volunteer, click the "Continue" button.

The "Groups" tab

• If your assigned 4-H Volunteer responsibilities is to serve as a Committee Member, 4-H Council Member, Fair Board Member, or in an advisory role, click on the drop down menu and select the appropriate Group and Volunteer Type.

Once you have entered all your club(s), project(s), and/ or group(s) you need to click on "Submit Enrollment" and you are done!

oggeo in as i	Clover: Mrs.					My Member
					W Home L	II My Member
Enrollment	Member Settings					
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	Personal Ad	iditional	Health	Volunteer Screening	Participation	
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Clubs	Projects		Groups			
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Member Settings					
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Projects	6	roups	n -		
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Select a Proj	ect: Select a	project		•	
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Select a Volunteer T	pe: Select a	a volunteer	type	•	
	1	dd Project			
		Project List	5		[New Loo
P	oject	Years	in Project	Volunteer T	ype E
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	Personal Addition Information Information		Volunteer Screening	Participation	
Clubs	Projects	Groups			
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	Select a Group:	ielect a group		•	
8	ielect a Volunteer Type:			\$	
		Add Group			
1		Group List			[New Look]
	Group		Volu	nteer Type	Edit
		<< Previou	8		
		Submit Enrollr	nent		

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If there is another 4-H Adult Volunteer in your family enrolling in 4HOnline, they will need to repeat this process beginning at the Member List page.

Once your enrollment has been submitted, it is sent to your County Cooperative Extension Office to be reviewed. If there are any issues with your enrollment – incorrect or missing information, etc. – you will receive an e-mail with instructions for logging back in (with the same email/password you set up) and making the necessary corrections. If there are no issues, you will receive an e-mail stating that you have been accepted and will have access online to your enrollment to make any updates throughout the 4-H year.

Keep your login (family email address) and password handy so that you can log in to the website and update your records as needed. Changes in address, phone number and email address are items that should be kept up to date.

Next year, when it's re-enrollment time, you'll log in to the records you created this year, and simply "reactivate" any members or adult volunteers in your family—the family information only needs to be entered once.

FAQ – Frequently asked Questions

Passwords and E-mail Addresses

Q: I forgot my password, how can I get it?

A: On the login page, click on "I forgot my password" and then click "Send My Password". The Password will be sent to the Email address associated with the Family login.

Q: I forgot the e-mail address that I used, how can I get it?

A: You will need to contact your County Extension office and ask them to look at your Family profile for the correct e-mail address.

Q: I requested my password to be sent, but it never came, what can I do?

A: Contact your county Extension office and ask for your password to be reset. Also be sure that you confirm with the County Extension office the email address associated with the Family login. You should also check your spam or junk mail folder to be sure the e-mail notices are not being placed in that folder.

Q: I completed my profile over a week ago and my enrollment status it is still listed as "pending", what do I do?

A: Contact your County Extension office and ask them to review your enrollment, or ask if there are any issues with it.

This guide was adapted from resources published by Michigan State Extension and Perdue Extension

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