# NC COOPERATIVE



NC STATE



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 13-19 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

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 your county 4-H, 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:	••••••••••••••••••••••••••••••••••••••
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.
- You do not need to complete the Password Management section as this time \*unless you want to change your password. \*\*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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Logged in as 🏯 Clover				# Ho	me   🕅 My Member Lis
Credit Cards Email History Fa	mily	Family Settings	Login History		
	Fa	mily Informa	tion		
		Profile Information	n		• Required Fields
	cloverpower@noemail.com			joe@4honline.com	
• Last	Name	Clover			
• Mailing A	ddress:	Box 7655			
	• City:	Raleigh			
	• State:	North Carolina		\$	
• Zij	Code:	27695			12345
Primary	Phone:	919-515-8466			555-555-1234
<ul> <li>Correspondence Pref</li> </ul>	erence	Email		\$	
• 4-H (	County	Training		\$	
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New Pa	ssword:				
Confirm New Pa	ssword:				
		Update Passwo	ord		
		Continue >>			
Delete Family Only delete a family if they will never re	turn.				

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".

Encolment and Event Registration	North Carolina 4-	I Youth Development		C+ Log
ogged in as 🚔 Clover			🐔 Home   🕅 My M	ember
	Mem	ber List		
	Mer	nber List		
Member Types				
Adults: 4-H volunteers, both direct and	resource. Parents do not e	nroll as adults unless they are active 4-	H volunteers.	
Contact: Adults who are NOT active vo	alunteers, non-members or a	uests, and youth younger than cloverbu	id age (5-8).	
Youth: 4-H members between the age				oram
You will need to enroll as a family an check YES in order have access to volu		ers, when you get to the question "Are y	vou a volunteer?", you m	ust
		ers, when you get to the question "Are y Add A New Family Member	rou a volunteer?", you m	ust
check YES in order have access to volu			rou a volunteer?", you m	ust
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check YES in order have access to volu Clover Family Edit Family 1101 Clover Way Rateigh, NC 27695-0001	nteer training.	Add A New Family Member select a member type Add Member	•	ust

# 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"
- 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.
- Choose your residence.
- Complete the Military Service of Family only if it applies.

H@nline North	Carolina 4-H Youth Development	(+ Logout	Volunteer
Enrollmest and Event Registration	4	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: Chapterone, Community Club Leader, Project Leader, etc.
Enrollment			Are you a Volunteer?: No:   Yes:
			Ethnicity
	e e e e e e e e e e e e e e e e e e e		Are you of Hispanic or Latino ethnicity?    No  Yes
	rmation Information ult Personal Information		Race
Au	Profile Information	• Required Fields	Check all the races that apply to you. If you selected "Not Hispanic", you must select at least one opti
E	mail: nc4hvolunteers@gmail.com	joe@4honline.com	White: 🕑
• First N	ame: Mrs.	ī	Black or African American:
Middle N	ame:	1	American Indian or Alaskan Native:
- Last N	ame: Clover	1	Native Hawaiian or Pacific Islander:
	iuffix:	1	Asian:
Preferred N	ame:	1	Balance (other combinations):
• Mailing Add	ress: 1101 Clover Way		Residence
Mailing Addre	ess 2:		
	City: Raleigh		Farm: O Town under 10.000 and rural non-farm: O
• 5	State: North Carolina :		Town/City 10,000 - 50,000 and its suburbs:
• Zip C	code: 27695-0001	12345	Suburb of city more than 50,000:
• Ge	nder: Select gender		Central city more than 50,000:
Primary Pt	one: 919-555-8440	555-555-1234	
Cell Pt	none:	555-555-1234	Military Service of Family
You wish to receive notices via	a text 🔲 @ Select your provider	\$	Family Member Military Service: No one in my family is serving in th 🕈
mes: Work Pt	sage.	555-555-1234	Branch of Service:
• Years in		#	Branch Component:
<ul> <li>Emergency Contact N</li> </ul>			
• Emergency Contact Ph		555-555-1234	Continue >>
Emergency Contact Cell Ph		555-555-1234	
<ul> <li>Emergency Contact Relation</li> </ul>			
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• 4-H Co	wake	•J	

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

# 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	
Personal Additional Health Form Volunteer Participation	I authorize contacting the listed references, previous employers, and volunteer organizations. I understand the omission or misrepresentation of information requested is just cause for non-appointment or dismissal as a 4-H volunteer. If appointed volunteer, I agree to abide by the policies of the North Carolina Cooperative Extension and the North Carolina 4-H Program my volunteer responsibilities to the best of my ability.	l as a m and to fulfi
	Interest automate the "Interest automate and a second second second second second second and the second sec	
NC 4-H Volunteer Standards of Behavior		REQUIRED
North Carolina 4-H Volunteer Standards Of Behavior		REQUIRED
Families and other youth-serving organizations place trust in North Carolina Cooperative Extension to provide quality leadership an		REQUIRED
reards or participants in 4-H programs. The opportunity to work with youth is a privileged position of trust section of the sector of participants in 4-H programs. The opportunity to work with youth is a privileged position of trust should only be held by those who are willing to commit to upholding behavior that fulfills this trust. For these reasons, the following behavior guidelines are provided for volunteers working in the North Carolina Cooperative Extension A-H program.	Volunteer Waiver, Release, Hold Harmless, Indemnification, and Media Release Agree	ment
<ol> <li>Treat others in a courteous, respectful manner demonstrating behaviors appropriate for a positive role model for youth.</li> <li>Obey the laws of the locality, state and nation.</li> <li>Make all reasonable efforts to assure that 4-H youth programs are accessible to youth without regard to race, color, nationa origin, religion, sex, age, disability or policical affiliation, and promote a spirit of positive.</li> <li>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 authonties.</li> <li>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 or earthorne e.</li> </ol>	I have agreed to serve as a volunteer for the NC Cooperative Extension, 4-H Program, and NC State, and I recognize that participation is a privilege afforded to me by the NC Cooperative Extension, 4-H Program, and NC State, I fully understand and assume all of the risks associated with my volunteer duties. I do hereby affirm and acknowledge that I have been fully the inherent hazards and risks associated with my volunteering, including property damage, falls, contact with other particip vehicle accidents, stings, bites, soratches, exposure to wildlife and nature, and other personal injuries. I accept and assume known and unknown, involved to me and my property in the volunteer activity, and I am voluntarily participating in reliance judgment and knowledge of my experience and capabilities, and medical or other conditions. In consideration for being allo participate, I hereby agree to the following:	, appreciate informed of pants, motor le all risks, upon my ow
<ol> <li>Operate motor vehicles (including machines or equipment) in a safe and reliable manner and only with a valid operator's lio and the legally required insurance coverage.</li> <li>Inform county 4-H staff of any arrests or charges of oriminal activity. (Temporary suspension pending resolution of the case be required.)</li> <li>Notify Extension staff prompty of any incident which may violate 4-H policies or personal rights.</li> <li>Do not require 4-H participants to purchase materials, supplies, equipment, animals or services from any specific vendor.</li> <li>Teach 4-H youth to provide appropriate animal care and treat animals humanely.</li> <li>Do not consume aicohol or lifegal substances while responsible for youth in 4-H activities nor allow 4-H youth participants u supervision to do so.</li> </ol>	employees, agents and oried namines No Cooperaive Extension, 4-m registers of action and damages for boldy injury or death th may suffer as a result of, or in any manner, directly or indirectly, connected with or proximately caused by, my participation as a understand that this waiver and release precludes my right to recovery of damages in the event I am injured in the course of volumeter duties or activities. I understand that first aid may be available on site, and if injury cours, medical and/or hospit sought. I hereby grant my permission for medical providers to conduct such alignancit, thereputes, and operative proceed of the event of the ev	hat I may volunteer. I of performing tal care will b ires as
12. Accept supervision and support from county, district, and state 4-H staff while involved in the 4-H program. North Carolina 4-H Volunteer Agreement Volunteers are asked to carefully consider the following expectations and confirm a willingness to observe these by signing where	I shall defend, hold harmless and indemnify NC Cooperative Extension, 4-H Program, and NC State, its trustees, officials, i employees, agents and other volunteers, from and against all damages, claims, liabilities, causes of action, judgments, set costs and expenses (Including, but not limited to, reasonable expert witness and attorney fees) that may at any time arise of by any person as a result of bodily injury, death or property damage, or as a result of any other claim or cause of action of whatsoever, ansing from or in any manner connected with, directly or indirectly, my acts or omissions in performing volume	ttlements, or be claimed any nature
Indicated. In addition, adults serving as volunteers can expect the following from the North Carolina Cooperative Extension (NCCE <u>NCCE AGREES TO:</u> Provide orientation training for the position. Set educational tone and directions. Provide asistance, support and encoursgement.	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 Program, and NC State agree that my image or likeness in photographs, videos, or audio may be used for educational or promotional purposes, in posting on the Internet. I agree that the use herein may be without compensation to me. I hereby waive any right to inspec the finished electronic, photograph, or printed matter that may be used in conjunction with them now or in the future. I am releasing NC Cooperative Extension, 4-H Program, and NC State, its agents, employees, licensees and assigns from any, which I may have for invasion of privacy, right of publicity, defamation, copyright infringement, or any other causes of actor the use, adaptation, reproduction, distribution, broadcast or exhibition of such recordings.	cluding ct or approve expressly and all claim
Informe seasanamic, support and energy devided to the job.     Inform of coming events and energy devided to the job.     Inform of coming events and activities.     Make annual evaluations.     Provide training opportunities and material to develop understanding and management of the volunteer assignments.     Provide educational 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 who may claim by or th am eighteen (16) years of age or older, and have full capacity to enter into this agreement and do so voluntarily. If the volu under the age of 18 the parent / guardian must agree.	
<ul> <li>Provide timely information on events, programs, and opportunities for youth at the county, state, and national levels.</li> <li><u>VOLUNTEER AGREES TO:</u></li> </ul>	I have read, fully understand and agree to the assumption of risk, waiver, release, hold harmless and indemnificat forth above.	ion terms s
Be supportive of Extension programs and staff members.     Participate in County Leader Association meetings and training as appropriate.     Inform enrolled syuth of Extension program opportunities.	I agree to photo/media use for any public release of by NC State	
Supply County Extension Office with application updates annually.     Abide by the North Carolina 4-H Volunteer Standard of Behavior.	I do not agree to photo/media use for any public	
Abde of ale for a calorine of a colorise caloridation of periods.     Participate in available training as appropriate to fulfill my duties.     Watch Child Abuse and Reporting Video (URL): https://www.youtube.com/watch?v=C9Jnqk0Yrgc&feature=em-upload_ow	release by NC State T-Shirt Size: Youth Large \$	
Yes, I agree REQUIR Member Signature REQUIR		
Member Signature REQUIR		

#### **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	n Screening
	Health Form
This person takes medications on a routine basis	
Yes	
Medication(s) - Name, Reason, Dosage, Time Taken:	
mesideeiley mane, reeser, seedge, mite raren.	
	1
Known allergies to foods, drugs, insect stings or bites,	
etc:	
Date of Birth (DOB):	
Check box if 'Yes'' to indicate w	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:	
Hay fever, season allergies:	
Impaired hearing: Wear glasses or contacts:	8
Allergies to bee stings, insect bites:	
	8
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:	
	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
North Carolina 4-H Youth Development	(+ Logout
(a)nline" North Carolina 4-H Touth Development	Have you ever received a traffic violation, if so
	please explain. * If none type "none" .:
Ilment and Event Registration	
ed in as 🛔 Clover: Mrs.	# Home   My Member List Employment History: Current Occupation,
	Employer, City & State:
rollment Member Settings	
	Employment History - Previous 7 years:
	Occupation, Employer, City and State, years of
	employment
Personal Additional Health Volunteer Particl Information Information Form Screening	lipation
mornation mornation Form Screening	Name of last school attended or currently
Volunteer Screening	attending, city & state:
volunteer ocreening	Did you graduate?
	Varjed atter Varjed atter
Background Check	
the second state and state and state state and a	No, I didn't O
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 🔘	
No 🔘	
	References: Please list three persons, not related
Volunteer Screening	to you, who have knowledge and have known you
Have you been a 4-H volunteer before?	for at least two years. Please provide complete
-	addresses, phone numbers, email address and
Yes, I have been a volunteer.	their relationship to you.:
No, I have not been a volunteer.	Social Security numbers are collected for the sole
Why are you interested in being a 4-H	purpose of conducting background clearances.
volunteer?:	Providing the information is optional, however, for
	those volunteer positions that require a criminal
	background check (4-H Club Leader, Volunteers who
	transport youth, chaperoning overnight events,
lave you ever worked with youth before,	Managers of 4-H Club / Group Accounts, etc.) this
please explain briefly.:	information is necessary for program participation.
	*Please use the URL to download the Volunteer Background Screening Form and return it to your
	Background Soreening Form and resurt it to your local 4-H agent.
What time commitment are you	
considering?	None 💿
Are you a 4-H alumnus?	At this time, I agree to provide my social security
	number
Yes, I am a 4-H Alumnus 💿	At this time, I do NOT agree to provide my social
Yes, I am a current 4-H Member 🔘	security number. I understand my volunteer 🔘
No, I am not a 4-H Aumnus or current 4-H	participation may be limited.
Member	Please download the Volunteer Background Check Form here:
	mease download the Volunteer Background Check Form here:
State:	
State: Do you have access to a car?	https://no4h.ces.ncsu.edu/wp-content/uploads/2018/03/VOLUNTEER-SCREENING.pdf
State:	https://no4h.ces.ncsu.edu/wp-content/uploads/2018/03/VOLUNTEER-SCREENING.pdf
Do you have access to a car?	https://no4h.ces.ncsu.edu/wp-content/uploads/2018/03/VOLUNTEER-SCREENING.pdf

# 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!

ogged in as & G	clover: Mrs.					
					W Home   D	My Member
	Member Settings					
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	member who does not be	ong to a 4-H o	dub, please	e select the	Member at Large	club option ino
the drop down in	menu.	-			-	aus opeon iro
the drop down in		-			-	aub opeion iro
the drop down in	menu.	ib Leader, you			-	aus opeon iro
the drop down in	nenu. Volunteer who is <u>not</u> a Ciu	ib Leader, you Add	a Club		nd click "Continue."	aus opion iro
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the drop down in If you are a 4-H	renu. Volunteer who is <u>not</u> a Clu Select a Club: Select a Volunteer Type:	Add Select a clu Select a vo	a Club a Club ib lunteer tyj d Club	this page a	nd click "Continue."	Piew Looi
the drop down in If you are a 4-H	tenu. Volunteer who is <u>not</u> a Ciu Select a Volunteer Type: Club	Add Select a clu Select a vo	a Club a Club ib lunteer tyj d Club	this page a pe W	nd click "Continue."	Piew Looi

	Clover: Mrs.				# Home   💷	My Member
Enrollment	Member Settings					
	Personal	Additional	Health Form	Volunteer Screening	* Participation	
Clubs	Projects	0	oups			
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		ject Select a	project		•	
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Enrolment	Member Settings				
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Clubs	Projects	Groups			
		Add a Group			
	Select a Group:	Select a group		¢ \$	
		Add Group			
		Group List			[New Look]
	Group		Volu	nteer Type	Edit
		<< Previous			

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 "re-enroll" any members or adult volunteers in your family.

# 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

Updated Oct., 2019