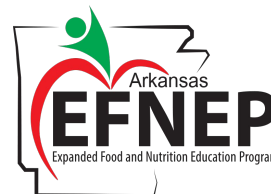# Volunteer Registration Form

EFNEP Program Year: _____

Volunteer Information

1. Name: _____

2. Address: _____

3. City: _____

4. State: _____   5. Zip: _____

6. Phone: _____   7. Email: _____

8. Gender: ☐ Female   ☐ Male

9. Volunteer's Age Category: ☐ Adult (18+)   ☐ Youth (≤17)

10. Ethnicity: ☐ Hispanic or Latino   ☐ Non-Hispanic/Non-Latino

11. Race:

☐ White   ☐ Black/African-American
☐ American Indian or Alaskan Native   ☐ Asian
☐ Native Hawaiian or Pacific Islander   ☐ Not Provided

12. EFNEP Educator ID#: _____

   Name: _____

13. Has the volunteer ever been or is now an EFNEP participant? _____

14. Volunteer Role (4 options)   &   Duties (7 options):

☐ Formal Volunteer Program   ☐ Support Service   ☐ Language & cultural context
☐ Non-Agency/Non-Paid Volunteer   ☐ Recruitment/follow-up   ☐ Content Development
☐ Agency Paid Volunteer   ☐ Educational Support   ☐ Programmatic support
☐ Student Intern Volunteer   ☐ Data Collection

15. Annual hours spent supporting Adult EFNEP: _____

16. Annual hours spent supporting Youth EFNEP: _____

The Volunteer Hours Tracking Chart is on the back of this form.

ADULT EFNEP Volunteer Hours Tracking Chart

Months	Hours					Total Hours
	Week 1	Week 2	Week 3	Week 4	Week 5	
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
					Total	

YOUTH EFNEP Volunteer Hours Tracking Chart

Months	Hours					Total Hours
	Week 1	Week 2	Week 3	Week 4	Week 5	
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
					Total	