

Years of composting and waste reduction experience: _____

Specific composting and waste reduction experience & interests: (please check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Bio-digesters | <input type="checkbox"/> Pollution remediating plants | <input type="checkbox"/> Upcycled gardening |
| <input type="checkbox"/> Compost/bio heating | <input type="checkbox"/> Reducing consumer waste | <input type="checkbox"/> Upcycled landscaping |
| <input type="checkbox"/> Composting bin construction | <input type="checkbox"/> Reducing electricity/resources | <input type="checkbox"/> Water conservation |
| <input type="checkbox"/> Composting toilets | <input type="checkbox"/> Reducing food waste | <input type="checkbox"/> Water harvesting |
| <input type="checkbox"/> Green roofs | <input type="checkbox"/> Soil health/conservation | <input type="checkbox"/> Worm composting |
| <input type="checkbox"/> Greenscaping | <input type="checkbox"/> Sustainability assessment | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Hugelkultur | <input type="checkbox"/> Terraced composting | _____ |
| <input type="checkbox"/> Pesticide reduction methods | <input type="checkbox"/> Upcycled crafts/clothing | _____ |

List your affiliations related to composting, waste reduction, etc.

List your volunteer experience; be specific about length of service and about your roles and responsibilities:

Other skills, interests, or experience: (please check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Computers | <input type="checkbox"/> Drawing/illustrating | <input type="checkbox"/> Research/data collection |
| <input type="checkbox"/> Website development | <input type="checkbox"/> Writing/publishing | <input type="checkbox"/> Public speaking/teaching |
| <input type="checkbox"/> Artwork/displays | <input type="checkbox"/> Proofreading | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Marketing/fundraising | <input type="checkbox"/> Other _____ |

Please provide specific information on the above checked categories:

If you are able to speak, read, or write a language(s) other than English, please list: (including American Sign Language)

Personal References & Emergency Contact(s)

References: List non-family members who have knowledge of your skills, abilities, and qualifications. Individuals should have worked with you on projects and activities and/or have direct experience with or knowledge of your qualifications. Please provide complete addresses and phone numbers.

Name:

First

Last

Relationship

Contact

Information:

Home Phone

Work Phone

Email

Address:

(Street)

(City)

(State)

(Zip)

Name:

First

Last

Relationship

Contact

Information:

Home Phone

Work Phone

Email

Address:

(Street)

(City)

(State)

(Zip)

Name:

First

Last

Relationship

Contact

Information:

Home Phone

Work Phone

Email

Address:

(Street)

(City)

(State)

(Zip)

Background Checks

After receipt of the training fee, you will receive an email from TheAdvocates@sterlingvolunteers.com asking you to initiate a background check using Sterling Volunteers—a third party vendor used by Washington State University.

I authorize Washington State University Extension to contact the listed references and understand that a criminal background is required prior to final consideration of my application to volunteer. I understand that misrepresentation or omission of required information is just cause for non-appointment as a volunteer with Washington State University Extension. I understand that I serve at the pleasure of the Washington State University Extension and agree to abide by the policies of Washington State University Extension and individual program areas and to fulfill the volunteer responsibilities to the best of my ability.

Applicant Signature:

Date:

Applications may be returned to the Lewis County Extension office at 17 SW Cascade Ave., Chehalis, WA 98532; mailed to 351 NW North St., Chehalis, WA 98532; or submitted via email at jason.adams@lewiscountywa.gov

Extension programs and employment are available to all without discrimination. Evidence of noncompliance may be reported through your local Extension office. Persons with disabilities who require alternative means for communication or program information or reasonable accommodation need to contact Patrick Shults at patrick.shults@lewiscountywa.gov at least two weeks prior to the beginning of training.

Volunteer Expectations Agreement

Washington State University Extension appreciates your commitment to share your knowledge, experience, and enthusiasm with the Master Recycler Composter (MRC) program and trusts that this partnership will be mutually fulfilling during the time you serve in this capacity.

WSU Extension Volunteer Expectations are in place to ensure the safety and well-being of all participants. A volunteer's involvement as a Master Recycler Composter is a privilege and a responsibility. Please read and initial the following expectations of MG volunteers.

- ___ Represent WSU Extension and the MRC program with dignity and pride.
- ___ Treat others in a courteous, respectful manner, and serve as a positive role model for our community.
- ___ Work respectfully and cooperatively with WSU Extension and Lewis County Solid Waste Utility staff, program partners, and volunteers.
- ___ Abide by policies and guidelines of WSU Extension and the Lewis County MRC program.
- ___ Promote a spirit of inclusion and a welcoming environment for all volunteers and community members.
- ___ Accept supervision and feedback from the Program Coordinator and Lewis County Extension Director.
- ___ Uphold an individual's right to dignity, self-development, and self-direction.
- ___ Operate tools, machinery, vehicles, and other equipment in a safe and responsible manner.
- ___ Handle fundraising and finances in an ethical manner according to the policies set forth by the Master Recycler Composter Foundation of Lewis County.
- ___ Refrain from abusing any participant physically or verbally and report such abuse, if observed.
- ___ Refrain from profanity, harassment, bullying, divisiveness, or other disruptive and offensive behavior.
- ___ Refrain from excluding other volunteers from online communication available to all volunteers.
- ___ Refrain from using alcohol and other drugs in an illegal or inappropriate manner.
- ___ Comply with equal employment opportunity and nondiscrimination laws.

I read, understand, and agree to the above expectation. I understand and agree that any action on my part deemed by the Program Coordinator or Extension Director to contradict any portion of this agreement is grounds for corrective action or termination of my volunteer status in the WSU Lewis County Master Recycler Composter Program.

Print Name _____

Signature _____ Date _____