

VOLUNTEERS

The University of Tennessee recognizes the valuable contributions of those persons giving freely of their time and talents for the benefit of the University without compensation. These persons are "VOLUNTEERS" in every sense of the word. The State legislature in the enactment of the Tennessee Claims Commission Act of 1984 recognized the need the protection of volunteers from legal actions while performing their service on behalf of the University. As such, the volunteers who are registered with the University receive the same civil immunity from liability, as does an employee of the university under the Act. Volunteers under the claims commission Act are not covered for Worker's Compensation.

The term "Registered Volunteer" means those persons who are not employees of the University who provide service to the University in an approved program that are listed and reported to the Division of claims Administration, State of Tennessee.

To become a "Registered Volunteer", the department, having the volunteer, must report (register) the volunteer through Lotus Notes Volunteer Database.

A report will be sent from the University of Tennessee, Office of Risk Management, to the Division of claims Administration on a quarterly basis. In the event a volunteer is not properly registered and a claim is made against that person for his/her University service, the Claims Commission will accept the claim as though the volunteer was registered. However, the University of Tennessee will be charged for any expenses or payments made rather than these costs being paid from the Liability claim Fund. The department failing to register/report their volunteer would be charged for these costs, up to the limit of \$300,000.00.



ADULT VOLUNTEER APPLICATION FORM

Mission of Tennessee 4-H Youth Development

To provide research-based Extension educational experiences that will stimulate young people to gain knowledge, develop life skills and form positive attitudes to prepare them to become capable, responsible and compassionate adults.

Vision of Volunteer Involvement in Tennessee 4-H Youth Development

Volunteers will be woven into the fabric of Tennessee 4-H Youth Development, playing a key role in fulfilling the mission of the organization. Caring and knowledgeable volunteers will deliver quality programs that enhance life skill development for Tennessee's youth. This group of diverse volunteers will be vital to the organization, providing innovative ideas and serving as key resources and 4-H ambassadors in their local communities. The effective engagement of trained volunteers will multiply the efforts and accomplishments of UT Extension personnel.

UT Extension aims to provide a safe environment for all persons involved in 4-H Youth Development activities. This application is designed to be an information-gathering aid in order to successfully match the applicant's skills and interests with the appropriate position description and needs of the organization. Answers given by the applicant may be verified.

GENERAL INFORMATION

Name _____
Last First M.I. Name you prefer

Home Address _____ How long at this address? _____
Street, Box, Route, Apt. #

City State ZIP County

Mailing Address (if different) _____

Email Address _____ How long have you resided in this county? _____

Phone _____
Daytime Evening Last Four Digits of Social Security Number (required)*

*The last four digits of your social security number or personal tax identification number is required by UT Risk Management for any volunteer or friend of UT. The last four digits of your social security number will be used only once for the assignment of a special UT personnel number. Your SSN will not be released and will remain confidential.

4-H EXPERIENCE

Are you a 4-H alumnus/alumna? ☐ Yes ☐ No

If yes, where? _____
City County State

If yes, what year(s) were you a 4-H'er? _____

Have you ever been a 4-H volunteer? ☐ Yes ☐ No

If yes, where? _____
City County State

Why are you interested in a 4-H volunteer position? _____

Have you ever worked with youth before? ☐ Yes ☐ No

If yes, please explain briefly. _____

What time commitment and duration are you considering?

_____ Hrs./week _____ Hrs./month ☐ 1-3 months ☐ 3-6 months ☐ 6-12 months

Do you prefer to work directly with ☐ youth ☐ adults ☐ both

If you prefer to work directly with youth, what age level(s) do you prefer? (Check all that apply.)

☐ Explorer (4th grade) ☐ Junior (5th & 6th) ☐ Junior High (7th & 8th) Senior: ☐ Level I (9th & 10th) ☐ Level II (11th & 12th)

TRANSPORTATION

Do you have access to a car? ☐ Yes ☐ No

Do you have a valid driver license? ☐ Yes ☐ No

Driver License Number

State

Date of Expiration

Have you ever been cited for a traffic violation? ☐ Yes ☐ No

If yes, please explain. _____

EMPLOYMENT AND VOLUNTEER EXPERIENCE

(This information is needed for the past 10 years. Please attach extra pages as necessary.)

1. _____
Current Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

2. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

3. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

4. _____
Previous Occupation/Volunteer Position Employer/Organization Name

Employer/Organization Address

Employer/Organization Telephone

City/State/ZIP

Email Address

Employed From/To

EDUCATIONAL BACKGROUND

Name of Last High School Attended

State

County

Did you graduate? ☐ Yes ☐ No

If not, please circle the highest grade completed. 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ GED ☐

Education Beyond High School (Please begin with current or most recent.)

Institution/City/State

Attended From (Month/Year) To (Month/Year)

Degree

Major

Institution/City/State

Attended From (Month/Year) To (Month/Year)

Degree

Major

Languages Spoken (other than English)

Other Educational or Special Training (CPR training, First Aid training, etc.)

REFERENCES

Please list three people, not related to you, who have knowledge of your qualifications and have known you for at least two years. Please provide complete addresses and phone numbers.

1.	Name	Street Address	City/State/ZIP
	Day Phone Number	Evening Phone Number	Email Address
	Relationship		
2.	Name	Street Address	City/State/ZIP
	Day Phone Number	Evening Phone Number	Email Address
	Relationship		
3.	Name	Street Address	City/State/ZIP
	Day Phone Number	Evening Phone Number	Email Address
	Relationship		

I authorize contacting the references listed on page 3, previous employers and volunteer organizations. I understand the omission or misrepresentation of information requested may result in non-appointment or dismissal as a 4-H volunteer. If appointed as a volunteer, I agree to abide by the policies of UT Extension and the Tennessee 4-H Youth Development program and to fulfill my volunteer responsibilities to the best of my ability. I also understand that UT Extension may contact other individuals as needed to verify my fitness and experience in working with youth.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete and made in good faith.

Applicant Signature

Date

13-0104 10/12

Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development. University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating. UT Extension provides equal opportunities in programs and employment.





BACKGROUND DISCLOSURE FORM

Last Name

First Name

M.I.

UT Extension aims to provide a safe environment for all persons involved in 4-H Youth Development activities. This form is designed to be an information-gathering aid in order to successfully match the applicant with a volunteer position.

A "yes" answer does not automatically exclude you from becoming a registered volunteer. If there are any changes in answers to these questions, the volunteer should immediately contact the local Extension office.

1. Have you ever had problems with

a. Substance abuse?

☐ Yes ☐ No

b. Criminal behavior?

☐ Yes ☐ No

c. Child abuse or neglect?

☐ Yes ☐ No

d. Suspension or revocation of your driving privileges?

☐ Yes ☐ No

2. Have you ever had an indictment, conviction, imprisonment or fine for any criminal violation including, but not limited to, DUI, substance abuse, child abuse or child neglect?

☐ Yes ☐ No

3. If yes, to any of the above questions, give date(s), location(s) and complete name at the time(s).

4. If yes, to any of the above questions, please describe what steps you have taken to correct the problem(s).

5. Other than the above, is there any other fact or circumstance involving you or your background that would affect your ability to be entrusted with the supervision, guidance and care of youth under the age of 18? ☐ Yes ☐ No (If yes, please explain.)

6. Do you currently have the minimum vehicle insurance coverage required by the State of Tennessee? ☐ Yes ☐ No

13-0104 10/12

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BACKGROUND SCREENING CONSENT

Last Name	First Name	M.I.	Social Security Number
Current Street Address		How long?	Date of Birth
City	State	ZIP	County
Home Phone	Driver License Number	State	Date of Expiration

*The last four digits of your social security number are collected for the sole purpose of conducting background clearances. Providing the information is optional; however, for those positions that require criminal background checks, this information is necessary for program participation.

List below any previous residence(s) (beginning with the most recent) and any alias, maiden or other names for the past seven years. (Include city, state and zip code.)

1.	Previous Street Address	How Long at This Address		
	City	State	ZIP	Alias, Maiden or Other Names
2.	Previous Street Address	How Long at This Address		
	City	State	ZIP	Alias, Maiden or Other Names
3.	Previous Street Address	How Long at This Address		
	City	State	ZIP	Alias, Maiden or Other Names

Have you ever been convicted of a misdemeanor or felony other than a misdemeanor traffic violation? ☐ Yes ☐ No

If yes, please give date, nature, county/state, and disposition of offense. (Information should include any situation in which the applicant was sentenced for a crime, unless the sentence was reversed on appeal. A criminal record will not necessarily prevent an applicant from becoming a 4-H volunteer, but rather will be considered as it relates to specifics of the volunteer position for which you are applying.)

I hereby authorize the 4-H agent or authorized representative of the organization bearing this application to obtain a criminal and traffic violation background check. I give my consent to a criminal and traffic violation background check.

I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete and made in good faith.

Applicant Signature	Date
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Reference Check Form

Name of Volunteer Applicant: _____

Volunteer Position Applied for: _____

Name of Reference: _____

Telephone: _____

Name of Interviewer: _____

I. Introductory Comments

- Your name
- Name of organization, name of applicant and volunteer position applied for
- Applicant requested that we call them to verify some information about possible volunteer position with UT Extension
- Applicant has given permission for them to verify his/her fitness and experience in working with youth
- Conversation will probably take about 10 minutes and can be conducted at their convenience
- Information given will be kept confidential

II. Reference Check Questions

1. How long and in what capacity have you known the applicant?

2. How would you describe the applicant? What three words would you use to describe the applicant?

3. What strengths would the applicant bring to the volunteer position?

4. What difficulties would the applicant have in fulfilling the duties of this volunteer position?

5. How comfortable would you be in having the applicant work for you on an important project?

6. How does the applicant interact with youth?

7. Describe how the applicant gets along with people in general.

8. What experience does the applicant have in working with people of diverse backgrounds? (i.e. generational, socioeconomic status, racial, ethnic, religion, gender, sexual orientation, disability, etc.)

9. Are you aware of any drug abuse problems or history of criminal conduct on the part of the applicant? If so, please explain.

10. Is there anything else you can tell us that might help in considering the applicant for this volunteer position?

III. Closing Comments

- Thank them for their time and assistance in helping to select the most qualified individuals to work with UT Extension programs.

Signature of Interviewer

Date



Tennessee 4-H Youth Development Volunteer Agreement and Standards of Behavior

Applicant Name: _____

Tennessee 4-H Youth Development Volunteer Standards of Behavior

Families and other youth-serving organizations place trust in UT Extension to provide quality leadership and care for participants in 4-H programs. The opportunity to work with youth is a privileged position of trust that 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 UT Extension 4-H Youth Development program.

1. Treat others in a courteous, respectful manner, demonstrating behaviors appropriate for a positive role model for youth.
2. Obey the laws of the locality, state and nation.
3. Make all reasonable efforts to assure that 4-H youth programs are accessible to youth without regard to race, color, national origin, sex or disability and promote a spirit of positive participation.
4. Recognize that verbal and/or physical abuse and/or neglect of youth is unacceptable in 4-H Youth Development programs, and report suspected abuse to 4-H officials and the proper authorities.
5. Do not participate in or condone neglect or abuse that happens outside the program to 4-H youth participants, and report suspected abuse to proper authorities.
6. 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.
7. Inform county 4-H staff of any arrests or charges of criminal activity against you. (Temporary suspension pending resolution of the case may be required.)
8. Notify Extension staff promptly of any incident that may violate UT Extension policies or personal rights.
9. Do not require 4-H participants to purchase materials, supplies, equipment, animals or services from any specific vendor.
10. Teach 4-H youth to provide appropriate animal care and treat animals humanely.
11. 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.
12. Accept supervision and support from county, region and state 4-H staff while involved in the 4-H Youth Development program.

Tennessee 4-H Youth Development Volunteer Agreement

Volunteers are asked to carefully consider the following expectations and confirm a willingness to observe these by signing where indicated. In addition, volunteers serving can expect the following from UT Extension.

UT EXTENSION AGREES TO:

- ❖ Provide orientation training for the position.
- ❖ Set educational tone and directions.
- ❖ Provide position descriptions.
- ❖ Provide assistance, support and encouragement.
- ❖ Give recognition for time and energy devoted to the position.
- ❖ Inform of coming events and activities.
- ❖ Make annual evaluations.
- ❖ Provide opportunities and materials to develop understanding and management of the volunteer assignments.
- ❖ Provide educational materials to be used for project and club organizations.
- ❖ Provide timely information on opportunities for youth at county, region, state and national levels.

VOLUNTEER AGREES TO:

- ❖ Complete new 4-H leader orientation and training.
- ❖ Be supportive of Extension programs and staff members.
- ❖ Participate in county leader association meetings and trainings as appropriate.
- ❖ Inform enrolled youth of Extension program opportunities.
- ❖ Supply county Extension office with application updates annually.
- ❖ Abide by the Tennessee 4-H Youth Development Volunteer Standards of Behavior.
- ❖ Participate in available training as appropriate to fulfill my duties.

I have read and understand the Tennessee 4-H Youth Development Standards of Behavior and Volunteer Agreement. I agree to perform my duties as explained by Extension staff and to abide by the 4-H Code of Conduct and any other rules specific to individual events at which I may be serving as a 4-H volunteer. I understand that volunteering with UT Extension is a privilege, not a right. I further understand that I may terminate this appointment without prior notice. I understand and agree that failure to comply with this agreement is grounds for immediate suspension and/or termination of my volunteer status with the Tennessee 4-H Youth Development program.

Volunteer Signature

Date

UT Extension Representative's Signature

Date

THE UNIVERSITY of TENNESSEE 
INSTITUTE of AGRICULTURE

13-0107 10/12(Rcv)

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University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating.
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KNOXVILLE CHATTANOOGA MARTIN HEALTH SCIENCE CENTER AGRICULTURE PUBLIC SERVICE SPACE INSTITUTE

HR0580 – Code of Conduct

Effective: July 1, 2012 **Revision No:** 8

Topics:

<u>Introduction</u>	<u>Responsible Use And Protection Of Confidential Information</u>
<u>General Principles And Statements Of Ethical And Responsible Conduct</u>	<u>Additional Information</u>
<u>Ethical And Responsible Conduct</u>	<u>Specific Examples Of Prohibited Conduct</u>
<u>Responsible Reporting Of Suspected Violations And University Response</u>	<u>Respect For Persons</u>
<u>Respect For Others</u>	<u>Respect For Property</u>
<u>Avoiding Conflicts Of Interests</u>	<u>Standards Of Safety</u>
<u>Responsible Use Of University Resources</u>	<u>Compliance With Laws And University Policies</u>
<u>Responsible Conduct In Research</u>	<u>Work Performance</u>
<u>Commitment To Environmental Health And Safety</u>	<u>Standards Of Attendance</u>

Objective:

To provide employees of the University of Tennessee with guidance on how to conduct themselves in an ethical and responsible manner.

Policy:

Introduction

The Code of Conduct was developed to supplement and clarify existing university policies, procedures, and rules. It does not replace, limit, or otherwise alter any existing policies. Employees are expected to familiarize themselves with the Code and to abide by it. Employees who violate the Code will be subject to appropriate disciplinary action. Employees should direct specific ethical or compliance questions to their supervisor or the university's director of compliance. The university's Code of Conduct is comprised of 1) general principles and statements of ethical and responsible conduct and 2) specific examples of prohibited conduct.

General Principles and Statements of Ethical and Responsible Conduct

1. Ethical and Responsible Conduct In carrying out its educational, research, and public service missions, the university relies on the ethical and responsible conduct of all employees. Even the appearance of unethical or irresponsible conduct can be damaging to the public's trust in the university. Employees are expected to conduct themselves fairly, honestly, in good faith, and in accordance with the highest ethical and professional standards and to comply with applicable laws, regulations, contractual obligations, and university policies.
2. Responsible Reporting of Suspected Violations and University Response
 - a. General Statement of Reporting Obligation Employees are expected to report any good-faith concern that compliance violations might have occurred, including, but not limited to, the following: violations of state or federal law or regulations; fraud in the operations of government programs; misappropriation of state or federal resources; acts that endanger the health or safety of the public or employees; and mismanagement of programs, funds, and/or abuses of authority. Employees are expected to report compliance concerns at the earliest possible opportunity by contacting their immediate supervisor, the next level of supervision, the appropriate campus/institute compliance officer, Office of Audit and Compliance (865-974-6611), or the Institutional Compliance office (865-974-4438). Employees

wishing to remain anonymous should report their concerns to the State Comptroller's Fraud Hotline (1-800-232-5454⁽⁹⁾). Concerns will be referred to the appropriate university office for investigation. Employees are expected to cooperate fully in investigations. As required by Fiscal Policy FI0130 Fraud, Waste and Abuse department heads and other management officials must report suspected fraud, waste, and abuse of university resources, and all allegations of such activity made to them, immediately to the Office of Audit and Compliance.

- b. **Mandatory Reporting of Child Abuse and Child Sexual Abuse** Employees must comply with Tennessee laws on mandatory reporting of child abuse and child sexual abuse. Tennessee laws mandate reporting by any person who has knowledge of physical or mental harm to a child if: 1) the nature of the harm reasonably indicates it was caused by brutality, abuse, or neglect; or 2) on the basis of available information, the harm reasonably appears to have been caused by brutality, abuse, or neglect. Tennessee law also mandates reporting by any person who knows or has reasonable cause to suspect that a child has been sexually abused, regardless of whether it appears the child has sustained an injury as a result of the abuse. A report of child abuse or child sexual abuse must be made immediately to one of the following authorities:

- The Tennessee Department of Children's Services (call the Central Intake Child Abuse Hotline at 1-877-542-2873⁽⁹⁾ or 1-877-237-0004⁽⁹⁾).
- The sheriff of the county where the child resides.
- The chief law enforcement official of the city where the child resides.
- A judge having juvenile jurisdiction over the child.

University police departments are not included in the list of authorities. Reporting to university police, a supervisor, or any other university official or employee does not satisfy an individual's duty to report child abuse or child sexual abuse to one of the authorities listed above.

- c. **Protection from Retaliatory Discharge** Employees are protected from retaliatory discharge if in good faith they report or attempt to report illegal activities, or if they refuse to participate in illegal activities. For purposes of this policy, illegal activities are violations of the civil or criminal code of this state or the United States or any regulation intended to protect the public health, safety, or welfare. Employees are also protected from other forms of retaliation for reporting or seeking guidance regarding potential or actual criminal conduct.

3. **Respect for Others** People are the University of Tennessee's most important resource for accomplishing its teaching, research, and public service missions. Accordingly, employees are expected to be committed to creating an environment that promotes academic freedom, diversity, fair treatment, and respect for others. Employees are expected to treat one another, students, and the general public in an honest and respectful manner.
4. **Avoiding Conflicts of Interests** Objectivity and integrity are essential qualities for employees of a public institution such as the University of Tennessee. For the university to carry out its missions with unquestioned credibility, employees are expected to maintain the highest levels of integrity and objectivity as they perform their duties. Employees are expected to take all reasonable precautions and seek appropriate guidance to ensure that their outside interests do not place them in conflict with carrying out their duties and responsibilities as UT employees. Employees must disclose outside interests in accordance with university policies so that they can be reviewed and managed or eliminated, as appropriate.
5. **Responsible Use of University Resources** Employees must use university property, funds, technology, time, and other resources for legitimate business purposes. Employees must not use university resources for personal gain or to benefit third parties, unless a specific exception has been granted in accordance with policies. Employees are expected to be responsible stewards when using university funds for business travel or entertainment.
6. **Responsible Conduct in Research** As members of a research university, employees must conduct research with the highest integrity and in compliance with federal, state, and local laws and regulations and university policies. Employees must recognize that failure to do so can result in significant penalties or criminal prosecution for both employees and the university. Employees involved in conducting research are expected to become familiar with applicable laws, regulations, and policies and to consult with their campus/institute research or compliance office whenever they have concerns or questions. Employees are expected to submit accurate, timely, and complete reports and documents related to research.
7. **Commitment to Environmental Health and Safety** Employees are expected to be committed to protecting the health and safety of all university students, faculty, staff, volunteers, patients, and visitors. To accomplish this,

the university provides information and training to employees about health and safety hazards and safeguards. Employees are expected to exercise good health and safety practices and to comply with all health and safety laws and regulations.

8. **Responsible Use and Protection of Confidential Information** Employees are entrusted with a variety of confidential information about students, faculty, staff, alumni, donors, research sponsors, licensing partners, patients, and others. Employees must access, use, protect, disclose, preserve, and dispose of confidential information in compliance with applicable laws, regulations, contracts, and university policies.
9. **Additional Information** For university policies, statements, guidelines, and available training related to each of the principles of the Code of Conduct, visit the [Office of Institutional Compliance](#) website.

Specific Examples of Prohibited Conduct

No Code of Conduct can list all prohibited conduct. The following information, which is not all-inclusive, illustrates some examples of specifically prohibited conduct that may lead to disciplinary action, up to and including, termination, as either unsatisfactory work performance or work-related behavior, or gross misconduct, under university policy.

10. Respect for Persons

- a. Disorderly conduct, including, but not limited to, using discriminatory, abusive, or threatening language; fighting, provoking a fight, or attempting bodily harm or injury to another employee or to any other individual or threatening physical action or injury on university property or during university activities; or other conduct that threatens or endangers the health, safety, or well-being of any person.
- b. Violation of any university policy against harassment, discrimination, or retaliation.

11. Respect for Property

- a. Willful or negligent damage to university property.
- b. Theft or dishonesty.
- c. Tampering with or wantonly destroying university data, records, or other information; gaining unauthorized access to such information; disclosing confidential information; or otherwise misusing university data or information.
- d. Unauthorized use of university vehicles, mail services, identification and credit cards, telephones, computers, computer equipment, or other university equipment or materials. Computers and computer accounts are provided to employees to assist them in the performance of their jobs. Employees do not have a right to privacy in anything they create, send, or receive on a university computer. The university has the right to monitor, for business reasons, any and all aspects of any university computer system, including employee e-mail.
- e. Soliciting, collecting money, or circulating petitions on university property at any time without permission of the chief business officer or designee.

12. Standards of Safety

- a. Possession of firearms, explosives, or other dangerous materials on university property or during university activities, unless the employee is authorized either by university policy or law to carry firearms, explosives, and other dangerous materials and it is also necessary to do so in the course of employment (police officers, R.O.T.C. personnel, etc.).
- b. The unlawful manufacture, distribution, dispensation, possession, or use of alcohol, illegal drugs, intoxicants, or controlled substances; abuse of prescription drugs while on duty; use of alcohol in a university vehicle on or off university property; possession or use of alcohol while on duty (except at university-sponsored events and other events an employee is expected to attend as part of his or her duties); or reporting to work under the influence of illegal drugs or alcohol or while unlawfully using controlled substances.
- c. Refusal to obey security officials, Emergency Management personnel, or other proper authorities in emergencies.
- d. Failure to comply with safety rules, regulations, or common safety practices.
- e. Failure to report an accident involving on-the-job injury or damage to university property.
- f. Smoking in violation of university policy.

13. Compliance with Laws and University Policies

- a. Falsification of university records.
- b. Misrepresentation of academic credentials, which is defined by Tennessee law as follows: "A person commits the offense of misrepresentation of academic credentials who, knowing that the statement is false and with the intent to secure employment at or admission to an institution of higher education in Tennessee, represents, orally or in writing, that such person1) has successfully completed the required course work for and has been awarded one or more degrees or diplomas from an accredited institution of higher education; 2) has successfully completed the required course work for and has been awarded one or more degrees or diplomas from a particular institution of higher education; or 3) has successfully completed the required course work for and has been awarded one or more degrees or diplomas in a particular field or specialty from an accredited institution of higher education." Misrepresentation of academic credential is a Class A misdemeanor.
- c. Behavior or conduct unacceptable to the university or the community at large.
- d. Violation of federal government security regulations as outlined in contracts.
- e. Any violation of any law in the performance of duties or that affects the ability to perform duties satisfactorily.
- f. Failure to comply with Tennessee laws on mandatory reporting of child abuse and child sexual abuse.
- g. Failure to comply with laws regarding mandatory reporting requirements applicable to health care professionals' interactions with patients while acting within the scope of university employment.
- h. Failure to comply with the university's conflict of interests policy.
- i. Fabrication, falsification, plagiarism, or other serious unethical or illegal deviations from accepted practices in proposing, conducting, reporting the results of or reviewing research of service activities, in violation of university policy or state or federal law or regulations.
- j. The access, use, or disclosure of a person's financial, personal, protected health information, or other confidential information without authorization or legal justification, in violation of university policies or law, e.g., privacy provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Federal Educational Rights and Privacy Act (FERPA).
- k. Gambling on university property or during university activities.
- l. Flagrant violation or failure to observe traffic or parking regulations.

14. Work Performance

- a. Insubordination or refusal of an employee to follow instructions or to perform designated work or to comply with directives of authorized university officials.
- b. Failure to wear proper uniform or identification in the prescribed manner as may be required by the university.
- c. Sleeping on the job.
- d. Failure or refusal to maintain or obtain required licensure, certification, or registration.
- e. Instigating or participating in deliberate low productivity and/or interfering with another employee's work.

15. Standards of Attendance

- a. Unexcused Absence. An absence without proper notification or satisfactory reason is unexcused. An absence of three consecutive days without notification or satisfactory reason is considered a voluntary termination.
- b. Repeated Tardiness. Tardiness is defined as arriving at work past the appointed starting time without supervisory approval.
- c. Other Absences. Such absences include the failure of employees to report to their work place at the beginning of the work period, leaving work before the end of the work period, and failure to inform the supervisor when leaving the work area.



National Sex Offender
Quick Search *

Enter a first name and last name; then press
Search.

OR [search by location](#)



NSOPW FAQs

Public Registry Sites



TENNESSEE LAW ON MANDATORY REPORTING OF CHILD ABUSE AND CHILD SEXUAL ABUSE

All members of the University community are responsible for compliance with Tennessee laws on mandatory reporting of child abuse and child sexual abuse. Please go to the following website to find detailed information from the Tennessee Department of Children's Services on how to identify and report child abuse and child sexual abuse: <http://www.tn.gov/youth/childsafety.htm>.

The following is a summary of key provisions of Tennessee law on mandatory reporting of child abuse and child sexual abuse.

Who Must Report

Tennessee law mandates reporting by **any person** who has knowledge of physical or mental harm to a child if: (1) the nature of the harm reasonably indicates it was caused by brutality, abuse, or neglect; or (2) on the basis of available information, the harm reasonably appears to have been caused by brutality, abuse, or neglect.

Tennessee law also mandates reporting by **any person** who knows or has reasonable cause to suspect that a child has been **sexually abused**, regardless of whether it appears the child has sustained an injury as a result of the abuse.

The Tennessee mandatory reporting laws define a child as a person under 18 years of age.

How to Report

Call 911 if the situation is a life threatening emergency. In other cases, a report of child abuse or child sexual abuse must be made **immediately** to one of the following four authorities:

- The Tennessee Department of Children's Services (reports can be made by calling the Central Intake Child Abuse Hotline at 1-877-237-0004);
- The sheriff of the county where the child resides;
- The chief law enforcement official of the city where the child resides; or
- A judge having juvenile jurisdiction over the child.

Please note that University police departments are not included in the list of authorities. Reporting to University police, a supervisor, or any other University official or employee does not satisfy an individual's duty to report child abuse or child sexual abuse to one of the authorities listed above.

Criminal Penalties for Failure to Report

Any person who knowingly fails to make a report of child abuse as required by Tennessee law commits a Class A misdemeanor.

Any person who knowingly and willfully fails to report known or suspected child sexual abuse, or who knowingly and willfully prevents another person from doing so, commits a Class A misdemeanor.

I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH THE REQUIREMENTS OF TENNESSEE LAW DESCRIBED IN THIS DOCUMENT.

PRINTED NAME: _____

SIGNATURE: _____

DATE: _____

MAURY COUNTY SHERIFF'S DEPARTMENT

1300 Lawson White Drive

Columbia, TN 38401

Telephone: (931) 380-5733

Fax: (931) 380-1122

Local Record Check

First, Middle Initial, and Last Name _____

Date of Birth _____

Last 4 digits of SSN: _____

Driver's License Number: _____

The above subject has been checked locally for arrest record. The following record has been found:

_____ No Record

_____ See Attached Form

- This record reflects only records recorded from 1999 until present. To obtain records prior to 1998 you must go to the Maury County Court House.

Records Clerk

Date

Check List for Employee and Volunteer Participation in Sponsored Programs for Minors on Campus

Please note that ALL UTIA Programs are deemed as sponsored programs. Therefore you will not need to report a list of sponsored programs in your department/area/region. While you will not need to report every sponsored program, ALL employees are considered as having the possibility of being in direct contact with minors who attend our programs or visit our campus locations.

Consequently the following needs to be performed **annually** by Department Heads, Directors, Regional Directors, County Directors (DHDRDCD), or their designees in regards to sponsored programs for minors on campus. In the case of a split appointment, the department/unit that is considered the “Responsible Account” is accountable for including the employee on their log.

1. Complete the employee and volunteer logs. **(See attached Excel files. Note...UT and TSU have separate files.)**
2. Based on level of exposure to minors during sponsored programs, determine the risk level (High or Low) of each UTIA employee, TSU employee, and volunteer. Please note that student employees who, in the course of their UT employment, participate in any sponsored program will need to be included on the employee log. Record the risk levels on the appropriate log.

High Risk - Any overnight involvement or regular, frequent contact for longer than two weeks

Low Risk – No overnight involvement; no more than two weeks of frequent contact/involvement

3. Perform the **national sexual offender registry** check and **Tennessee abuse registry check** for ALL employees and volunteers, both high and low risk. This is done annually.
4. The national sexual offender registry check is free and checks the mandatory sex offender registries in all 50 states. To perform a sexual registry check on an individual, go to the National Sex Offender Public Website at, <http://www.nsopw.gov/en-US> and enter the person’s name. First-time users may be required to agree to terms of use.
5. The Tennessee abuse registry check is free. To perform an abuse registry check on an individual, go to <https://health.state.tn.us/AbuseRegistry/Default.aspx> and enter the person’s name or social security number.

6. High risk employees and volunteers will need to have a current (within the last 4 years) background check.
7. For those who are high risk, check SUPER for volunteers, IRIS for UTIA employees and Dr. Tom Broyles (tbroyle1@tnstate.edu) for TSU employees to determine date of last background check. **(Bottom line: All high risk adults need to be background checked every 4 years. UT employees will be checked by Extension Evaluation and Staff Development. TSU employees will be checked by Dr. Tom Broyles. Counties should check volunteers with local law enforcement agencies. If you are not able to obtain background checks in the county, see steps 15-19)**
8. University of Tennessee employees who have undergone a background check will have a background check date in IRIS. To obtain this date: Go to PA20 “Display HR Master Data”, key in employee personnel number, click on the ORG tab, click on Company Instructions. No data in this field means no background check has been completed.
9. For high risk UTIA employees, if the last background check is over 4 years old the request for employee background check will be submitted through Extension Evaluation and Staff Development (EESD) to UT Human Resources Employment (see #15).
10. For high risk TSU employees, if the last background check is over 4 years old, submit request for updated employee background check through Dr. Tom Broyles (tbroyle1@tnstate.edu) at TSU.
11. For high risk volunteers, it is strongly recommended, in the counties, that the County Director establish a relationship and come to an agreement with local law enforcement to conduct the high risk volunteer background check.
12. If a local authority has performed a background check for a high risk volunteer, enter the name of the agency and date the background check was completed on the volunteer log
13. If a high risk volunteer has, through another agency (school system, employer, etc.) already had a background check completed, it is not necessary to do another check if the date of the check is current (within the last 4 years). Verify that this was done. Then, note

on the log the date of the background check and the name of the agency/person who performed the check.

14. If the DHDRDCD is unable to obtain background checks for high risk volunteers through local law enforcement or from another agency, then requests for background checks will be sent through EESD to UT Human Resources Employment (see #15).
15. Requests for background checks on high risk employees and high risk volunteers can be done through a group/mass Rapid Request to TruScreen. Submit the employee and volunteer log to EESD showing the employees and volunteers who are Tier 1 high risk and who require a background check. EESD will submit the list to UT HR Employment.
16. The high risk participant (employee or volunteer) will receive an email notification from TruScreen requesting their permission to conduct the background check.
17. If the high risk participant does not have an email address, contact EESD to have a paper authorization sent to the participant. The high risk participant will need to return the signed paper authorization through the USPS or through campus/interoffice mail.
18. EESD will be notified of declines or no responses (after several TruScreen contact attempts).
19. High risk participants who decline or fail to respond to request for background check will not be permitted to participate in UTIA sponsored programs.
20. If an adverse background check report is received for either an employee or a volunteer the County Director needs to notify their Regional Director.
21. The Regional Director, Department Heads, and other Directors will contact the UTIA/ Extension HR Officer, Izetta Slade, prior to any action being taken to discuss disposition of the employee or volunteer with the adverse report.
22. If a decision is made to NOT employ services of a volunteer with an adverse background check in the counties, the County Director will notify the volunteer of the decision. In other instances, the Department Head, Director, or designee will contact the volunteer to advise of the adverse report and decision to not employ the volunteer's services.

23. Appropriate parties (General Counsel, HR, Dean, Department Head, Regional Director, etc.) will be notified and involved in decisions regarding employee adverse background check reports.
24. The DHDRDCD will ensure that each employee and volunteer reads, understands, and agrees to comply with Tennessee law on the mandatory reporting of child abuse and child sexual abuse. **(See attachment)**
25. Each employee and each volunteer will need to sign the second page of the “Tennessee Law on Mandatory Reporting of Child Abuse and Child Sexual Abuse.” The DHDRDCD should retain the signed versions of the document in their county/department/unit files for volunteers. The signed forms for employees are sent to Human Resources to be placed in the employee’s personnel file. Record the date of signing on the appropriate log. This is done annually.
26. The DHDRDCD will make sure that **ALL** employees and volunteers complete the “Child Protection Training”. Training is to be completed every two years. **(Employees take online training in Skillport. Instructions are attached). Agents should train volunteers using video training or powerpoint described in No. 28)**
27. Employees can complete the "Child Protection Training" online training module in the Skillsoft eLearning system (Skillport). This is the preferred option for UT employees (netID is required). **(See attached instruction sheet)**

Instructions for employees:

To access the Child Protection Training, you will need your UT netID and your netID password to use Skillport. Next, you should access Skillport using this link: <https://oit2.utk.edu/cbt/login.php>. If you are a first-time user, it is necessary to be pre-registered in the Skillport system before you can access the training. Click on the Register hyperlink to register your netID. After your netID is registered, return to the original link above to login to Skillport.

After logging in, to find the training, click on the "Catalog" left-hand link, then the "Child Protection Training" folder. The "Child Protection Training" module section will appear. Click on the blue arrow to launch the training.

28. The DHDRDCD can present the ready-made “Child Protection Training” PowerPoint to volunteers. This option is available for groups and for those who do not have netID's

(such as volunteers). The PowerPoint can be obtained by email request to mclemore@tennessee.edu in UT Employee and Organizational Development.

29. It is also possible to have employees and volunteers attend a video conference of the “Child Protection” training. The training is facilitated by a UT System employee. Look for scheduled dates for the training in SUPER from EESD or call (974-7245) to find out the scheduled dates for the training.
30. Record the date of “Child Protection Training” for employees and volunteers on the appropriate log.
31. Give ALL volunteers a copy of the “Standards of Conduct for Covered Adults” and a copy of UT Human Resources policy HR 580 “Code of Conduct”. **(See attached document)**
32. County Directors are to forward completed employee and volunteer logs to their Regional Office. **(THIS IS NEW THIS YEAR! You should send your employee AND volunteer logs to Brandi in the RO)**
33. The Regional Office will check each log for accuracy and resolve discrepancies. Forms are then forwarded to EESD by July 1.
34. Department Heads and other Directors will forward the logs directly to EESD by July 1.
35. In the event that an employee or volunteer comes on board after the July 1 submission, all of the above is to be completed and a log submitted to your Regional Office (or, for Department Heads and other Directors, directly to EESD) for the “late” arriving employee or volunteer. **(Any new volunteers after you send in your log should be added to the list and kept in the county. You do not need to send updated lists to the RO after July 1. We will update the logs in the RO and Knoxville each year on July 1.)**
36. Preferred source for log transfer and storage is electronic. **(Send your Excel logs via email to Brandi. Do not send hard copies!)**

37. In the **rare** instances where unexpected, last minute, and unscreened low risk volunteers show up to participate in a UTIA sponsored program, all efforts should be made to provide safety for minors attending our programs. The following steps should be taken:
- a. Verify the identity of the low risk volunteer to include photo identification.
 - b. Conduct an on the spot check of the national sex offender registry and the Tennessee abuse registry (see #4 and #5).
 - c. If unable to conduct the on the spot registry checks, notify EESD the next business day of the exception.
 - d. The last minute low risk volunteer needs to read, understand, and agree to comply with Tennessee law on the mandatory reporting of child abuse and child sexual abuse. The low risk volunteer will need to sign the second page of the “Tennessee Law on Mandatory Reporting of Child Abuse and Child Sexual Abuse.” The signed versions of the document are retained in your county/department/unit files for volunteers.
 - e. Provide the low risk volunteer with a handout of the PowerPoint for the “Child Protection Training.
 - f. **Under no circumstances should unscreened potential sponsored program volunteers be accepted as High Risk volunteers.**

EXHIBIT B

STANDARDS OF CONDUCT FOR COVERED ADULTS

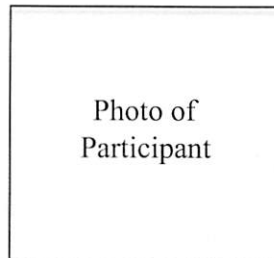
As a participant in [insert description of Covered Program] ("Program"), you have been identified as a "Covered Adult" for purposes of University of Tennessee Safety Policy 575 (Programs for Minors).

As a Covered Adult, you are responsible for complying with University of Tennessee Human Resources Policy 580 (Code of Conduct), a copy of which is attached.

In addition, you shall **not**:

1. Strike, shake, slap, administer corporal punishment to, or touch in an inappropriate or illegal manner, any minor.
2. Humiliate, ridicule, threaten, or degrade a minor.
3. Sleep in the same room or other enclosed space (such as a tent) as a minor, unless you are a parent/legal guardian/sibling of said minor.
4. Shower or take a bath with a minor or in the presence of a minor.
5. Dress or undress in the presence of a minor.
6. Invade the privacy of minors in situations such as changing clothes and taking showers and intrude unless to the extent that health and safety requires.
7. Use a camera or other imaging device in showers, restrooms, or other areas in which a minor has a reasonable expectation of privacy.
8. Wear clothing that is not discreet and modest when interacting with minors.
9. Possess or engage in the use of alcohol or illegal drugs, or be under the influence of alcohol or illegal drugs, during the Program.
10. Provide alcohol or illegal drugs to a minor, or provide prescription drugs or any other medication to a minor except in compliance with the policies of the [insert name of Covered Program].
11. Take a photograph or video of a minor or post information about a minor on the Internet without the written permission of the minor's parent or guardian.
12. Give a personal gift to a minor.
13. View pornography during the Program, or make any form of pornography available to a minor participating in the Program or assist a minor in any way in gaining access to any form of pornography.
14. Meet a minor off of the site of the Program or after the hours of the Program, even if another Covered Adult is present.
15. Have any personal, non-programmatic related communications with a minor during the Covered Program, or after the Program has ended, unless you have a relationship with the minor that existed before the Program.
16. Instruct, care for, supervise, guide, control, or routinely interact with a minor who is less than two (2) years younger than you (applicable only if the Program involves an overnight stay).

You should report violations of these standards of conduct by someone else (other than violations involving child abuse or child sexual abuse, the reporting of which shall be in compliance with Section 2 of University of Tennessee System Safety Policy 575) to your supervisor, the Designated Official (865-974-3061), the Office of the General Counsel (865-974-3245), UWA Audit and Consulting Services (865-974-6611), or the State of Tennessee audit hotline (1-800-232-5454).



Name _____

County _____

ADULT ACTIVITY AND EVENT ACCEPTANCE FORM
Volunteer or Paid Staff Member

The purpose of this form is to give you an opportunity to provide information concerning your health in case of an emergency. You must complete sections I, II and IV. Section III is optional. If under age 18, you should complete Form 600-A.

I. IDENTIFICATION

Name _____ Home Phone () _____
Last First Middle

Date of Birth _____ Sex ☐ Male ☐ Female

Home Address _____
Street/P.O. Box City State ZIP

Emergency Contact _____
Name

Address _____ Home Phone () _____
Street/P.O. Box City State ZIP

Relationship _____ Work Phone () _____

II. PUBLICITY RELEASE

As indicated by the signature below, I authorize the University of Tennessee, Tennessee State University, and the Tennessee 4-H Foundation to photograph, film, audio/video record and/or televise my image and voice, and biographical material, in whole or in part in any medium now known or developed in the future, without any restrictions.

Signature _____ Date _____

Date received in 4-H Center or county office _____

Name _____

County _____

III. HEALTH HISTORY AND MEDICAL RECORD

The information on this form will be provided to any health care providers in case of an emergency. This information will not be used to discriminate against a participant on the basis of any disability.

Name of Physician _____ Phone () _____

Medical/Hospital Insurance _____
Carrier _____ Policy of Group # _____

CHECK ALL THAT APPLY

☐ Allergy to a medicine, food, plant, or insect toxin. Explain _____

Is participant allergic to the following drugs: ☐ Penicillin ☐ Sulfa Drugs ☐ Tetracycline ☐ Aspirin

List allergies to other drugs or allergens _____

☐ Any condition that may require special care, diet or restriction of activities for medical reasons. Explain _____

☐ Asthma ☐ Heart Trouble ☐ Nosebleeds ☐ Diabetes ☐ Convulsions ☐ Fainting Spells

Do you wear? ☐ Dentures ☐ Contact Lens ☐ Other (Explain) _____

Is any medication, including medication for behavior modification, being taken at the present time? ☐ Yes ☐ No

If yes, explain _____

Date of most recent examination _____

Are you aware of any current health problems? ☐ Yes ☐ No If yes, explain _____

Is there any disease, accident, illness or past/present history related to the following? (If yes, please give dates and full details.)

	No	Yes	Year		No	Yes	Year		No	Yes	Year
Serious Illness/Injury	☐	☐	_____	Appendicitis	☐	☐	_____	Rheumatic Fever	☐	☐	_____
Surgery	☐	☐	_____	Kidney Infection	☐	☐	_____	Blood	☐	☐	_____
Ears/Eyes	☐	☐	_____	Back/Limbs/Joints	☐	☐	_____	Stomach	☐	☐	_____
Teeth/Tonsils	☐	☐	_____								

Immunizations	Last Yr. Given	Immunizations	Last Yr. Given	Have Had
Tetanus	_____	Measles	_____	☐ Measles
Diphtheria	_____	Mumps	_____	☐ Mumps
Polio	_____	Rubella	_____	☐ Rubella
Hepatitis (A, B or C)	_____	Varicella (Chicken Pox)	_____	☐ Chicken Pox
(circle one/any)				☐ Tuberculosis

IV. EMERGENCY MEDICAL RELEASE

In consideration of my participation in the 4-H activity or event, I provide the following release. I understand that a health problem or a medical emergency may develop that necessitates the administration of medical care, hospitalization or surgery. In the event of illness or injury, I hereby authorize the University of Tennessee, Tennessee State University, and its representative(s) or agents(s) to secure any necessary treatment, including the administration of anesthetics and surgery. I further give permission to the University of Tennessee, Tennessee State University, and its representative(s) or agent(s) to provide this medical history form to health care personnel. I authorize my physician, health care provider or any hospital to provide reasonable and necessary medical treatment or supplies. Either the original permission or a photostatic copy thereof is valid as an authorization.

I recognize that the event does not provide sickness or accident insurance coverage for participants. I accept responsibility for payments of those medical costs incurred for injuries or illnesses.

I have read this Release and Assumption of Risk Agreement and signed it on behalf of myself, my heirs, assigns and anyone entitled to act upon my behalf.

* Signed _____ Date _____
Volunteer or Paid Staff Member's Signature Month/Day/Year

*If for any reason you do not sign this, you must complete and sign Form 600-C.