VOLUNTEER RECOMMENDATION FORM #6.44

From:	4-H Association	
		CANADA 4-H Ontario
Name of volunteer candidate		4-11 Officano
4-H Participant #:		
The local 4-H Volunteer Screening Committee has	done the following:	
Interview completed		
Reference checked		
Asked candidate to fill in Participant Agreemen	nt Form #6.8 and hand into appropriate person	
Based on the completion of the volunteer candidate the Committee have any concerns about this individ		
☐ YES ☐ NO		
Comments:		
The local 4-H Volunteer Screening Committee		
Recommends Does NOT recommend	d	
 Has the Screening Contact checked the following fit Screening Interview Completed Reference Checks Completed Association Approved 	ields in the 4-H Ontario MWA Database:	
☐ YES ☐ NO		
Names of Volunteer Screening Committee Member	rs:	
1)	2)	_
3)	4)	_
Volunteer Screening Committee Contact Name (Ple	ease print)	
Volunteer Screening Committee Contact Signature	 Date	
Please return this form to the 4-H Ontario office 4-H Ontario Attn: Screening Officer 111 Main Street North, P.O. Box 212 Rockwood, ON NOR 2KO	at:	

Email: screening@4-hontario.ca Ontario 4-H Council ("4-H Ontario") Privacy Statement - 4-H Ontario respects the privacy of its members, volunteers, donors, sponsors, staff and stakeholders. We are committed to ensuring that appropriate measures and safeguards are in place to protect specific information that is held for the purpose of 4-H Ontario programs. We adhere to legislative requirements with respect to privacy. We do not rent, sell or trade mailing lists. If at any time you wish to be removed from any of our contact lists, simply contact us by phone at 519-856-0992, toll free at 1-877-410-6748, by fax at 519-856-0515 or via our website at www.4-H Ontario.ca. We will gladly accommodate your request. For further information regarding our commitment to privacy, please contact 4-H Ontario's

Privacy Officer at privacy@4-hontario.ca.

Fax: 519-856-0515

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FORM # 6.44