



# Master Wellness Volunteer Program Application

Due no later than January 18, 2019

Please print or type all information. Upon completion, return to:

Mail: Oklahoma County Cooperative Extension Service, 2500 N.E. 63<sup>rd</sup> Street, OKC, OK 73111 • Email: [ladonna.hines@okstate.edu](mailto:ladonna.hines@okstate.edu) • Fax: (405) 713-2123

Name: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Are you available to participate on the training dates? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If so, where? \_\_\_\_\_

Please list any volunteer work experience: \_\_\_\_\_

\_\_\_\_\_

List any experience you have working with community-type organizations (schools, youth, churches, senior citizens, etc.):

\_\_\_\_\_

\_\_\_\_\_

List additional interests, skills, hobbies: \_\_\_\_\_

\_\_\_\_\_

Do you have access to a computer? \_\_\_\_\_ Do you have Internet access? \_\_\_\_\_

Which contact method works best to reach you? (check one)

Email     Mail     Phone Call     Text     Facebook

List any post-secondary education/diploma and/or certifications:

---

---

Why do you want to become a Master Wellness Volunteer? \_\_\_\_\_

---

---

---

Anything else you would like us to know? \_\_\_\_\_

---

---

The Master Wellness Volunteer training will be held on the following dates from 9:00 a.m.-3:00 p.m. *An additional 10 hours will be homework assignment.*

February 12, 2019  
March 5, 2019

February 19, 2019  
March 12, 2019

February 26, 2019

You must complete all 40 hours of training to be a Master Wellness Volunteer.

*I wish to become a Master Wellness Volunteer in Oklahoma County. I am 19 years of age or older. I understand that should I be selected for the training program, I will be required to complete 40 hours of training. In exchange for the training, I will volunteer at least 40 hours of volunteer service under the direction of the county extension educator within the next year. I understand I will be asked to undergo a criminal background check. I also understand that as a volunteer, I will represent the Oklahoma State University, Cooperative Extension Service and will be called upon to provide research-based educational programs and disseminate educational materials. I also understand that in this capacity I cannot use my status as a volunteer to promote any personal opinions, business, or services or the opinions or services of other companies or agencies. I must present the research-based information on which the Oklahoma State University's education programs and services are based. I understand that I will become a Master Wellness Volunteer when I complete the training and pass the examination. In order to retain Master Wellness Volunteer designation in subsequent years, I will volunteer 10 hours and obtain 5 hours of education annually.*

*My signature below indicates that I do not have a conflict of interest and that all of the information contained in this application is true and accurate to the best of my knowledge.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Oklahoma State University, in compliance with Title VI and VII of the Civil Rights Act of 1964, Executive Order 11246 as amended, and Title IX of the Education Amendments of 1972 (Higher Education Act), the Americans with Disabilities Act of 1990, and other federal and state laws and regulations, does not discriminate on the basis of race, color, national origin, genetic information, sex, age, sexual orientation, gender identity, religion, disability, or status as a veteran, in any of its policies, practices or procedures. This provision includes, but is not limited to admissions employment, financial aid, and educational services. The Director of Equal Opportunity, 408 Whitehurst, OSU, Stillwater, OK 740781035; Phone 4057445371; email: eeo@okstate.edu has been designated to handle inquiries regarding nondiscrimination policies; Director of Equal Opportunity. Any person (student, faculty, or staff) who believes that discriminatory practices have been engaged in based on gender may discuss his or her concerns and file informal or formal complaints of possible violations of Title IX with OSU's Title IX Coordinator 4057449154.  
Issued in furtherance of Cooperative Extension work, acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, Director of Oklahoma Cooperative Extension Service, Oklahoma State University, Stillwater, Oklahoma. This publication is printed and issued by Oklahoma State University as authorized by the Vice President, Dean, and Director of the Division of Agricultural Sciences and Natural Resources and has been prepared and distributed at a cost of 20 cents per copy.