The purpose of Adult Agreement is to promote the safety and well being of all program participants in Extension youth programs. All adult and teen volunteers who work directly with youth in University of Florida IFAS Extension programs are expected to function within the following guidelines. In my role, I ___________________________ will:

1. Be courteous, and respect the individual rights of all participants.
2. Be a positive role model at all times, and exhibit good sportsmanship.
3. Represent the educational mission of the University of Florida Extension Service.
4. Accept support and supervision from Extension program representatives.
5. Comply with equal opportunity and anti-discrimination laws.
6. Treat animals in a humane and ethical manner, and guide youth to do the same.
7. Operate machinery and equipment in a safe and responsible manner.
8. Understand the responsibility of transporting youth in my vehicle, by having a current driver’s license, carrying proof of automobile liability insurance, driving safely, obeying laws, and ensuring that every passenger wears a seat belt.
9. Obey local, state and federal laws. Follow policies set for county, district, state and national youth programs.
10. Act wisely and responsibly to report threats toward the safety and wellbeing of participants.
11. Establish and maintain safe environments for youth and adult participants.
12. Only use the 4-H name/emblem and 4-H group funds when a 4-H group is chartered and as defined through the Florida 4-H Handbook.
13. Not leave youth under my supervision, without notifying an adult in charge of the event or delegation.
14. Not use or be under the influence of, alcohol or illegal drugs, while present at youth programs or while having responsibilities at Extension programs.
15. Not commit any criminal act involving youth or activities with Extension youth programs.
16. Not threaten or abuse any participant by verbal, physical, sexual or emotional means. And, if I observe abuse I will report it as outlined by the UF IFAS Extension Youth Protection Policy.

I have read and understand the Adult Agreement outlined above. I understand and agree that any action on my part that contradicts any portion of these expectations may be grounds for the suspension or termination of my role with University of Florida IFAS Extension youth program or my removal from the program activity. I understand that being involved with youth participants in Extension programs, is a privilege, not a right. (Appointments are renewed on an annual basis.)

____________________________________________________   __________________________
Signature of Adult           Date

____________________________________________________   __________________________
Signature of authorized University of Florida IFAS Extension Representative Date

Effective January 1, 2005 a signed copy of the Adult Agreement will be kept on file (with the adult’s immediate supervisor) for each adult working with Extension youth programs.