



EXTENSION
1890 LAND-GRANT INSTITUTION

CSU Extension Advisory Council Member Volunteer Service Agreement

Objective: Central State University (CSU) Extension Advisory Council members advise and assist CSU Extension in program planning and implementation, review of county educator candidates for hire, and in preparation, procurement and administration of the county portion of the budget.

Name of EAC Member: _____ **State AC Representative (Yes, Check):**

Terms of Appointment (2-year contiguous terms):

Term 1: Start Date: _____ End Date: _____

Term 2: Start Date: _____ End Date: _____ Member Initials for Term 2 _____

Term 3: Start Date: _____ End Date: _____ Member Initials for Term 3 _____

Key Responsibilities:

1. Advocate/communicate with legislators, commissioners and/or elected officials and decision-makers on behalf of CSU Extension.
2. Assist Regional Extension Associate and Extension County Educators in identifying program objectives based upon county needs.
3. Provide input on budget preparation and attend county commissioners/county delegation hearings in support of the Extension budget.
4. Assist in the recruitment and evaluation of CSU Extension program staff and in the evaluation of Extension programs.

Additional Responsibilities

- Attend regular meetings of the Council.
- Assist in promoting CSU Extension programs.
- Participate in orientation and other educational opportunities concerning policies, programs, marketing, and support of CSU Extension activities.
- Approve suitable office facilities, in cooperation with the County Commissioners and Regional Extension Associate.
- Optional - serve as an officer, member of the Finance Committee, County Public Awareness Team or as a member of the CSU and OSU Extension State Advisory Council.

The above-described time and effort is donated by the volunteer at his/her discretion to CSU Extension. This volunteer service does not confer the status of a CSU employee but does provide liability protection for volunteer service to the Extension.

Qualifications: Council members should be knowledgeable of the educational needs of county residents and how Extension can meet those needs.

Supervisor: Regional Extension Associate

I understand that I, or CSU Extension, may cancel this agreement at any time by notifying the other party. I hereby volunteer my services as described above to assist CSU Extension in its authorized work.

Signature of Volunteer

Date

Signature of Regional Extension Associate

Date