



## Tennessee 4-H Electric Camp Adult Leader Application Form

Name				Male Female	
Address					
County			lome Phone		
Email		1	-Shirt Size		
□ т	This applicant is certified as a Level 3 Adult Volunteer. Input date of certification				
Please indicate the following:					
1.	Favorite hobby				
2.	Away from home employment				
3.	School or community activities				
4.	Do you have a medical background (such as nursing, etc.)? If so, what?				
5.	Have your experiences as a volunteer leader been associated with a particular 4-H project?				
	Which discipline?				
6.	What specific tasks have you performed as a volunteer leader?				
7.	Disease indicate any other enecial talent interest ate you may have				
7.	Please indicate any other special talent, interest, etc. you may have.				
Check the bayes to describe your rose and athricity. Information will be used calculated as a will be used.					
Check the boxes to describe your race and ethnicity. Information will be used solely for compliance with affirmative action programs.					
	Rad	ce – Check all that apply	Ethnicity – Chec	k only one	
	☐ Black ☐ Asian	☐ White ☐ American Indian☐ Pacific Islander	<u></u>	ic	