



Tennessee 4-H Target Smart Camp Adult Leader Application Form

Name		
Address		
County		Home Phone
Email		T-Shirt Size
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 ampleyment	
3.	School or community activities	
4.	Do you have a medical background (such as nursi	ng, etc.)? If so, what?
5.	Have your experiences as a volunteer leader been associated with 4-H Shooting Sports?	
	Which discipline?	
6.	What specific tasks have you performed as a volunteer leader?	
7.	Disease indicate any other appoint talent interest a	to vou mou hous
1.	. Please indicate any other special talent, interest, etc. you may have.	
Check the boxes to describe your race and ethnicity. Information will be used solely for compliance with affirmative action programs.		
	Race – Check all that apply	Ethnicity – Check only one
	☐ Black ☐ White ☐ American Ind ☐ Asian ☐ Pacific Islander	<u>-</u>
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