



4-H #116(A)

### BRITISH COLUMBIA 4-H LEADER REGISTRATION

#### A. BASIC INFORMATION

Name: Last	First	Gender
Mailing Address: Street	City	Postal Code

If less than three years at this residence, previous address:

Date of Birth (M/D/Y)	Driver's License #	
Phone Number: Day	Best time to call: Evening	Best time to call:

#### B. EXPERIENCE

Previous Volunteer/Employment Experience: (List current or most recent experience first):

Organization/Employer	Position or Major Responsibilities	From: M/Y to M/Y

Skills, Training, Education:

4-H EXPERIENCE: Club you are planning to be a Leader with: \_\_\_\_\_

Are you a 4-H Alumni?       yes    no    Where were you in 4-H? \_\_\_\_\_

Have you ever been a 4-H Leader?       yes    no    If yes, how many years? \_\_\_\_\_

Where? \_\_\_\_\_

#### C. INTEREST

I am interested in a 4-H volunteer Leader position because:

\_\_\_\_\_

I feel that I can contribute to the 4-H Club program as a volunteer Leader by:

I would prefer to work directly with:  Youth  Junior (9 - 13 years)  Senior (14 - 19 years)  
 Adults  Both

I am available for:  1 – 3 months  3 – 6 months  6 – 12 months

**D. REFERENCES**

List three persons not related to you who have definite knowledge of your qualifications and have known you for more than three years. Addresses must be complete. These could include a current employer, a co-worker, or supervisor in a youth-serving organization (or someone who knows your ability to work with children, a family physician, a 4-H Leader, church clergy, etc.

Name	Address	Telephone

**E. TRAINING OPPORTUNITIES**

I will make every effort to participate in a basic 4-H Leadership training program in the coming twelve months.

**F. COMMITMENT**

I authorize contacting of the listed references. I understand that misrepresentation or omission of facts requested is cause for non-appointment as a 4-H Leader. If appointed as a volunteer, I agree to abide by all rules and regulations of the 4-H program and to fulfill the volunteer responsibilities to the best of my ability. I have read and understand *The Philosophies & Goals of the B.C. 4-H Program*.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Please return this application to your 4-H Leader Registration Committee at your earliest convenience. On completion of the Leader Registration process you will be notified of your acceptance.

Completed applications will be filed in the B.C. 4-H Provincial Council Office.

4-H #116(A)  
8/07  
B.C. Provincial/Regional/District 4-H Councils

