



Tennessee 4-H Electric Camp

Adult Leader Application Form

| Nan | ame | ☐ Male ☐ Female |
|--|--|-----------------|
| Address | | |
| Cou | ounty Home Phone | |
| Ema | | |
| 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 proj | ect? |
| | If so, what project? | |
| 6. | What specific tasks have you performed as a volunteer leader? | |
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| 7. | Please indicate any other special talent, interest, etc. you may have. | |
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| | | |
| 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 of | nly one |
| | ☐ Black ☐ White ☐ American Indian ☐ Hispanic | |
| | ☐ Asian ☐ Pacific Islander ☐ Non Hispa | anic |