

Caldwell County 4-H Camp Teen Leader Application

Due to the Cooperative Extension Office by Tuesday, April 15

NAME: _____

ADDRESS: _____ CITY: _____

Zip Code: _____ PHONE: _____

AGE: _____ BIRTHDATE: _____ CELL #: _____

Have you ever been a 4-H member? _____ If so, how long and in what capacity? _____

Have you ever attended 4-H Camp? _____ If so, how many years? _____

Leadership: List ways that you have had working with youth ages 9-13. Example: Volunteer work, clubs, church work, tutoring programs, etc. _____

References: Please complete the reference list below with people that know you and your work ethic. (Do not list relatives)

Name	Address	Phone	Relationship
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Continue on back:

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Choose the top five classes below that you would be interested in teaching or assisting with at camp. Number them according to your preference with 1 being your first choice and 5 being your last.

_____ Swimming	_____ Canoeing
_____ Fishing	_____ Archery
_____ Riflery	_____ Media
_____ Arts & Crafts	_____ Recreation
_____ High Ropes	_____ Low Ropes
_____ Soccer	_____ Volleyball
_____ Sewing	_____ Tye-Dye
_____ Nature	_____ Ga-GA Ball
_____ Kick Ball	

**** There is no guarantee that teen leaders will get their choice of class. This just allows us to consider your interest.

Use the bottom of this page and explain why you would like to be a teen leader at 4-H Camp?

