

Texas 4-H Youth Development Program DECLARATION OF ELIGIBILITY FORM

This form is requested in accordance with the requirement of the Texas Education Code and in cooperation with the Texas Education Agency and local school board policies.

Instructions: Complete one form per activity. 4-H member should return original form to the County Extension Office

| PARENT/GUARDIAN SECTION | |
|---|-------------------------------------|
| In accordance with 4-H policy, provided by our local Extension office, I respectfully request: | |
| Academic eligibility information only. | |
| Academic eligibility information and authorization to receive an excused absence from school. | |
| Date of Activity: Nan | ne of Activity: |
| Signature of Parent/Guardian: | |
| COUNTY EXTENSION AGENT SECTION | |
| I hereby certify thatis | |
| County and is scheduled to participate in this activity representing 4-H. He/she will be under the supervision of the Texas A&M AgriLife Extension Service faculty or agency's designated volunteer leader. | |
| Date | Signature of County Extension Agent |
| SCHOOL PRINCIPAL OR DESIGNEE | |
| ACADEMIC ELIGIBILITY (CHECK ONE) | |
| I do certify that the student is academically eligible to participate in the above mentioned activity. | |
| I do not certify the student because he/she is NOT academically eligible to participate in the above mentioned activity. | |
| EXCUSED ABSENCE (CHECK ONE) | EDUCATIONAL STATUS (CHECK ONE) |
| An excused absence will be granted. | Face-to-Face (on campus) |
| An excused absence will NOT be granted. | Virtual Option |
| Does not apply. | Homeschooled |
| Date | Signature of Principal or Designee |
| | Name of School |