



**Teen Leader  
Application  
Henry County 4-H Camp**



**June 8-11, 2010  
Return Deadline: March 15, 2010**

Interviews will be scheduled after deadline. Must be age 16 as of June 1, 2010.

Mandatory: A 4-H Enrollment form on file at the Extension Office and two written references before interview.

Name: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ (Cell) \_\_\_\_\_ Age: \_\_ Birthdate: \_\_/\_\_/\_\_

Grade Just Completed \_\_\_\_\_ T-Shirt Size: S M L XL 2X 3X (circle one)

Have you ever attended 4H Camp? \_\_\_\_\_ If yes, how many as a camper \_\_\_\_\_

If yes, how many as a teen leader? \_\_\_\_\_

**Camp Experiences:**

List camps you have attended and any leadership experiences you had at them:

Name of Camp	Leadership Experiences	Years Attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4-H Experiences:**

Give a brief background of your 4-H experiences, especially leadership roles you have held:

\_\_\_\_\_  
\_\_\_\_\_

**Other Experiences:**

**Describe other leadership experiences you have had with youth (church, school, etc.)**

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**In 100 words or less, please tell us why you want to be a 4-H Teen Counselor at 4-H Camp.**

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**Please list or describe other talents, skills, (including certifications such as CPR, First Aid, , etc.) or interests you have that may be of benefit as a teen leader:**

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**Please provide two written references. (References cannot be from family members)**

**All applicants will be interviewed prior to selection. Interviews will be conducted at the Extension Office. You can not sign up for an interview unless your application, enrollment form and two letters of recommendation are on file at the Extension Office prior to March 15<sup>th</sup>. Teen Training is mandatory.**

## Teen Counselor Contract

I, \_\_\_\_\_, understand that 4-H camp is an opportunity for development and is fun for the camper. My first responsibility is to the campers, their safety, their development, and their learning experiences. If an opportunity arises in which a choice between my enjoyment and the above mentioned responsibilities must be made, I will fulfill these responsibilities, knowing that I will find pleasure in helping others.

In signing this, I am acknowledging that I have read the fine print and I understand the challenges of serving as a teen leader. If chosen, I will honor my commitment and serve to the best of my ability.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

I understand the 4-H Teen Counselor program which \_\_\_\_\_ has applied for and give my permission for his/her participation.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date