



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. The original form should be returned to the County Extension Office.

**PARENT/GUARDIAN SECTION**

In accordance with 4-H policy, provided by our local Extension office, I respectfully request:  
(CHECK ONE)

- Academic eligibility information only.
- Academic eligibility information and authorization to receive an excused absence from school.

Date of Activity: \_\_\_\_\_ Name of Activity: \_\_\_\_\_

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

**COUNTY EXTENSION AGENT SECTION**

I hereby certify that \_\_\_\_\_ is a member of 4-H in \_\_\_\_\_ 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: *Danielle Wells*

**SCHOOL PRINCIPAL OR DESIGNEE SECTION**

**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)**

- |  |   |
|--|---|
| <input type="checkbox"/> An excused absence will be granted      | <input type="checkbox"/> Face-to-Face (on campus) |
| <input type="checkbox"/> An excused absence will NOT be granted. | <input type="checkbox"/> Virtual Option           |
| <input type="checkbox"/> Does not apply                          | <input type="checkbox"/> Homeschooled             |

Date used to determine eligibility: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Principal or Designee: \_\_\_\_\_

Name of School: \_\_\_\_\_