



PRAIRIE VIEW A&M UNIVERSITY  
COLLEGE OF AGRICULTURE AND HUMAN SCIENCES



Cooperative Extension Program

### 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: \_\_\_\_\_

#### 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: \_\_\_\_\_