

# 4-H AMBASSADOR/CULTURAL EXCHANGE CHAPERONE APPLICATION

(to travel with 4-H members on out of state trip)

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

RESIDENCE: \_\_\_CITY/TOWN\_\_\_SUBURB \_\_\_FARM \_\_\_RURAL NON-FARM

CHILDREN IN FAMILY: \_\_\_SON(S) \_\_\_DAUGHTER(S)

SPOUSE'S NAME: \_\_\_\_\_

SPOUSE'S OCCUPATION: \_\_\_\_\_

PREVIOUS EXCHANGE TRIPS YOU HAVE CHAPERONED:

MAJOR 4-H VOLUNTEER EXPERIENCES:

WHY I'D LIKE TO HELP CHAPERONE THIS PROGRAM:

TRAVEL EXPERIENCES I HAVE HAD:

ANY SPECIAL HEALTH CONSIDERATIONS? (Allergies, diabetes, etc.)

ARE YOU VIP (Volunteer Information Profile) CERTIFIED?

YES \_\_\_ NO \_\_\_ VIP RE-CERTIFIED FOR CURRENT YEAR YES \_\_\_ NO

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

A current 4-H Participation Form must be completed.

Please include a photo of yourself

Office use only: Date submitted: \_\_\_\_\_ Date VIP Completed \_\_\_\_\_