



Texas A&M AgriLife Extension Service
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 public school board policies.

PARENT/GUARDIAN/COUNTY EXTENSION AGENT – Complete This 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: _____ Name of Activity: _____

Signature of Parent/Guardian: _____

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 Brock Fry County Extension Agent

PRINCIPAL – Complete This Section

Check [√] one:

- I do certify that the student is academically eligible to participate in the above mentioned extracurricular activity.
- I do not certify the student because he/she is NOT academically eligible to participate in the above mentioned extracurricular activity.

Check [√] one:

- An excused absence will be granted.
- An excused absence will **not** be granted.
- Does not apply.

Signed: _____
Principal or Designee

Date: _____

_____ Name of School

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