



# Tolland County 4-H Food Revolution Counselor Application Form



Please type or print neatly

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

Age: \_\_\_\_\_

Home Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Availability (check all that apply):    Mon. 7/17        Tues. 7/18        Wed. 7/19        Thurs. 7/20

Partial days may be requested via. email ([Kathryn.davis@uconn.edu](mailto:Kathryn.davis@uconn.edu)). Counselor participation at Tolland County 4-H Camp Food Revolution is a volunteer experience.

Are you a member of UConn 4-H Program? (check one)        Yes        No

If you answered "yes" to the above question:

Club affiliation/county: \_\_\_\_\_

Years in 4-H: \_\_\_\_\_

Please list all food allergies: \_\_\_\_\_

T-Shirt Size (check one): Child:    LG    Adult:    SM    MD    LG    XL    other \_\_\_\_\_

Where did you hear about 4-H Food Revolution?

\_\_\_\_\_

Please write a short paragraph on the following page telling us a little about yourself, any experience working with children (not required) or 4-H and why you would like to volunteer at 4-H Food Revolution program.

Please return this completed application to the Tolland County 4-H office at: 24 Hyde Ave. Vernon, CT, 06066 by July 7<sup>th</sup>, 2017. Upon receiving your application, we will contact you with more information. Counselors over the age of 18 are subjected to a background check.

Counselors will have a mandatory training day on July 12<sup>th</sup>, 2017 to go over the schedule and prepare for the following week.

Any questions please contact Katy Davis at: [Kathryn.davis@uconn.edu](mailto:Kathryn.davis@uconn.edu) or by phone 860-875-3331

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