

New Mexico 4-H Leader Enrollment

2010 San Juan County

Date _____, 20 _____

First Name _____ Middle Initial _____ Last Name _____ 4-H Club Name _____

Address _____ City _____

State _____ Zip _____ Email _____

Home # _____ Work # _____ Cell # _____ Male Female

Years as Leader _____

LEADER ROLES

- Organizational Leader
 Assistant Organizational Leader
 Project Leader
 Countywide Leader
 Other _____

I Live Where? (check one)

- Farm or Ranch
 Town
 Indian Nation
 Rural

Race (Check all that apply)

- White
 Black
 American Indian
 Hispanic
 Other

Ethnicity (Check one)

- Hispanic or Latino
 Not Hispanic or Latino

Have you ever been:

- | | Yes | No |
|---|--------------------------|--------------------------|
| > convicted of a criminal offense? | <input type="checkbox"/> | <input type="checkbox"/> |
| > convicted for the use or sale of drugs? | <input type="checkbox"/> | <input type="checkbox"/> |
| > convicted of child neglect or abuse? | <input type="checkbox"/> | <input type="checkbox"/> |
| > convicted of a DUI offense? | <input type="checkbox"/> | <input type="checkbox"/> |
| > Hospitalized or treated for alcohol or substance abuse? | <input type="checkbox"/> | <input type="checkbox"/> |

Reference: Name: _____

Phone: _____

Address: _____

Reference: Name: _____

Phone: _____

Address: _____

If YES to any of these, please explain or discuss with extension agent.

As a leader, I certify that this 4-H Club does not discriminate or limit membership because of race, sex, color, national origin, religion, or handicap.

Signature of Leader _____

_____ First Year Leader _____ Re-enroll _____ Corrections (Add or Drop Projects)

Project Number	Name of Project	Send Projects Yes/No	Years in Project