	Texas 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):	
0	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 t	nat is a member of 4-H in
He/she will be unde leader.	er the supervision of the Texas AgriLife Extension Service faculty or agency's designated volunteer
C	Date County Extension Agent
Check $[]$ one:	PRINCIPAL – Complete This Section
[]	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.
0	An excused absence will <u>not</u> be granted.
0	Does not apply.
	ncipal or Designee
Name of School	

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