Alaska 4-H Authorization Application
(for use by family clubs, short-term groups
and similar non-fundraising entities)

District: ______________________________ Date: ____________________________

Name of 4-H group/family: __________________________ Date established (if group): __________

Number of current 4-H youth participants________________ Volunteer leaders: __________________

Contact information for current authorized 4-H volunteer leader(s)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Phone</th>
<th>E-Mail</th>
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The following requirements must be met in order for the 4-H family or group to be authorized to participate in 4-H. Please initial next to each requirement that has been fulfilled and attach information or list as applicable.

_____ Have regularly scheduled meetings and events on file with the District CES Office.
   List on back or attach.

_____ Have a written, planned educational program (in at least one project area) that includes the four 4-H Essential Elements and provides a variety of learning experiences.
   Fill out the following chart or attach similar.

4-H essential element definitions: belonging elements include safe environments, encouragement, team approach; generosity elements include respect, concern, service; independence elements include decision making, planning, goal setting; mastery includes knowledge and skill development, hands-on learning, teaching, mentoring.

<table>
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<tr>
<th>Date/Project(s)</th>
<th>Learning Method(s)</th>
<th>Belonging</th>
<th>Generosity</th>
<th>Independence</th>
<th>Mastery</th>
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<tr>
<td>Example: Oct. 15, 2008  Sewing</td>
<td>Fabric store tour, business meeting, game</td>
<td>x</td>
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Optional:

_____ Have an identified youth leadership structure (i.e., officers, chairs/co-chairs).

_____ Have written club operating procedures (attach).

Additional notes as needed:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Our 4-H entity understands that the use of the 4-H name and emblem is protected by federal law. Our 4-H entity declares that it does not discriminate in its membership or program practices on the basis of race, color, religion, national origin, sex, age, disability, veteran status, or sexual orientation. ______(initial)

We declare that we have met the above requirements.

Required Signatures:

____________________________________________________________________________________

Approved Volunteer Leader                                                             Youth Participant (if applicable)

____________________________________________________________________________________

District 4-H Youth Development Educator

Official 4-H State Office Use Only:

Authorization Approved/Renewed    Yes  No   n/a Date Approved/Renewed:________________________

Not approved for the following reason(s):

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Official signature

____________________________________________________________________________________