

NOVA SCOTIA 4-H LEADER APPLICATION

- Reference Check Form

Leader Information

First name	Last name	Sex M <input type="checkbox"/> F <input type="checkbox"/>
Mailing address	Postal Code	
Civic address	County	
Home phone	Work phone	
Email Address:		
Locale - Farm <input type="checkbox"/> Urban <input type="checkbox"/> Rural <input type="checkbox"/>		

Background Information

How long have you been living in this community?
What is the name and address of your current employer?
How long have you been working for this employer?

Volunteering Experience

If you have any previous 4-H experience, please describe your involvement.
Please outline your experience, if any, with other volunteer organizations.
Why do you want to be a 4-H Leader?

Other Screening Requirements:

The Police Record Check has been completed, and the results forwarded to the Nova Scotia 4-H Council, Volunteer Screening, PO Box 550, Truro, NS, B2N 5E3	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I have completed the Child Abuse Registry form and submitted it to Halifax.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I was a registered NS 4-H Leader in the previous year.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I attended the New Leader Training Session or completed the on line New Leader Information Session - Knowledge Test at www.gov.ns.ca/agri/4h	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Declaration:

I declare the information on this form is true and complete. I understand that misrepresentation or omission of facts called for in this screening process may disqualify me from being a 4-H Leader without notice, or cause non-selection. If selected as a 4-H Leader, I agree to abide by the Nova Scotia 4-H Policy, and to fulfill the Nova Scotia 4-H leader responsibilities to the best of my ability.

Signature	Date
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