



WILDLIFE STEWARDS IN-SCHOOL 4-H ENROLLMENT
 Please return to OSU Extension/4-H, 404 SE 80th, Portland, OR 97215

Primary Teacher's Name: _____ Phone: _____ School(s): _____

Address: City: _____ Zip: _____

E-mail: _____ School Web Site: _____

Have you ever been a Member and/or Leader in the 4-H Program? Yes No Year(s) _____

School Residence (check one): Towns/Rural non-farm City 10,000-50,000 Suburb over 50,000 Central City

TEACHER(S) PROFILE (indicate the participating teachers in the appropriate boxes)

TEACHER NAME	GENDER (M/F)	ETHNICITY				
		Caucasian	African American	Hispanic	Asian	Native American

4-H Areas of Interest: _____

INFORMATION ON STUDENTS: The following section on classroom information must be filled out completely in order for literature to be provided. This information is needed for statistical reporting in compliance with Federal Funding Requirements. Racial data is required by Affirmative Action Policy. All information is kept confidential.

Classroom Composition		Grade												
		K	1	2	3	4	5	6	7	8	9	10	11	12
Caucasian	Female													
	Male													
African American	Female													
	Male													
Hispanic	Female													
	Male													
American/Alaskan Native	Female													
	Male													
Asian Pacific Islander	Female													
	Male													
TOTALS														

I offer 4-H educational programs, activities, and materials without regard to race, color, religion, national origin, sex, or disability.

Signature

date

