



DECLARATION OF ELIGIBILITY FORM

This information 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.

COUNTY EXTENSION AGENT - Complete This Section

In accordance with Texas UIL and Texas 4-H policy, Texas AgriLife Extension Service - Bell County respectfully requests (check one):

- Academic eligibility information only
- XX Academic authorization to receive an excused absence from school for the following:**

Activity: _____

for the following Date(s):

Date: _____

I hereby certify that _____ is a member of 4-H in

Bell County

He/she will be under the supervision of the Texas AgriLife Extension Service faculty or agency's designated volunteer leader.

9/6/2016

PRINCIPAL - Complete This Section

Check one:

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.

An excused absence will NOT be granted.

Does not apply.

Signed: _____

School Principal or Designee

Date: _____

Name of School