## **Urban 4-H Youth Development**







Name			_Date:	PART OF THE	SERVICE		
Address							
				County			
	E-mail						
How did you hear abou		evelopment? _					
Education School	Name/City/State			Years Attended	Degree Received		
High School:							
College/University:							
Graduate School:							
Other (specify):							
Current area of study,	or major:						
Length of time you are	willing to commit to p	er week:		until what approximate	e date:		
This position requires commute?	travel within Minneapo _If so, what is your mea						
You will be working d	irectly with young peop	ple. What grad	de level(s)	do you prefer? (Check	all that apply.)		
	des K, 1, 2 des 6, 7, 8	¢	Grades 3, <b>6</b> 9,	4, 5 10, 11, 12+			
Availability: Please list your hourly	availability.						
Monday	Tuesday	Wednesday		Thursday	Friday		
Work Experience List all experience during the last five years, starting with your current or most recent job.							
Employer		Jo	b Title				
Address							
Phone							
Work performed							
Employer		Jo	b Title				
Address					_		
Phone							
Work performed							
Dates employed from							

Employer		Job Title		
Supervisor				
Work performed				
	m			
Other Experience Please list any skills	ce s or other experience that may help	you in your role with U	rban 4-H Youth Development.	-
What interests you	most about this position?			
References Please list three per members.  Name	sonal or professional references w	ho have known you at le <u>Phone</u>	ast two years. Do not include fan <u>E-mail</u>	ily
1.				
2.				
3.				
	and/or references I listed may be c		one or e-mail.	
• I am in no way	obligated to perform any voluntee	r service.		
Signature			Date:	
Paturn to:				

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