10/2014

Making a Difference for California



## Submit prior to training course **PERSONAL INFORMATION**

Name:							
Address:							
County:							
Home Phone:	Work Phone:						
Fax Number:	E-Mail:						
4-H Club/Unit:	Position:						
DISCIPLINE  Discipline							
Please rank in order: first, second, and third the discipline area you would like to receive training in:							
Archery	, <u> </u>						
Rifle		Re-loading					
Pistol Pistol		Black Powder/Mu	uzzle Loa	ader			
Shotgu		Coordinator					
(you will participate	in only one disciplin	e during the trainir	າg)				
TRAINING  Please list your previous shooting sports training received and any certificates you have received.							
Place liet your n	vrovious shooting sport		and any co	artificatos vou have received			
		s training received a	nd any ce				
Please list your p Discipline	revious shooting sport Training Receive	s training received a	nd any ce	ertificates you have received.  Certification Level			
		s training received a	nd any ce				
		s training received a	nd any ce				
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		s training received a	nd any ce				
	Training Receive	s training received a ed Date					
	Training Receive	s training received a					
	Training Receive	s training received a ed Date					
Discipline	Training Receive	s training received and ded Date  OTING BACKGRO	OUND	Certification Level			
Discipline  Do you have hunting	Training Receive SHO	s training received and ded Date  OTING BACKGRO	OUND				
Discipline	Training Receive SHO	s training received and ded Date  OTING BACKGRO	OUND	Certification Level			
Discipline  Do you have hunting Honors/Recognition	Training Receive SHO  ag experience?	s training received a ed Date  OTING BACKGRO	OUND No	Certification Level  Number of Years			
Do you have hunting Honors/Recognition Do you have compa	Training Receive  SHO  ng experience?  n: etitive experience?	s training received a ed Date  OTING BACKGRO	OUND No	Certification Level  Number of Years			
Discipline  Do you have hunting Honors/Recognition	Training Receive  SHO  ng experience?  n: etitive experience?	s training received a ed Date  OTING BACKGRO	OUND No	Certification Level  Number of Years			

## **CA 4-H Shooting Sports Program Training Request and Registration Form**

University of California
Agriculture and Natural Resources

10/2014

Making a Difference for California

## **COMMUNITY ACTIVITIES**

Please list your participation in community activities and organizations with offices or leadership positions held where applicable.

Organizat	ion or Activity	Offices/Leadership Pos	itions Held Hor	nors/Recognition			
Diago ro	and and an first	TRAINING LO		este es usua tasining in los			
		second, and third the sectio be willing to travel.	n you would like to rec	elve your training in, as			
Section:	JW Iai you would	be willing to traver.					
000	North	North Central	South Central	South			
Mileage:							
_	25 Miles	50 Miles	75 Miles	100Miles			
		REFEREN	CFS				
List two r	eferences that wil	l endorse your qualifications					
Name		Address	-	Phone			
SIGNATURES							
Applicant Si	anaturo:		Date:				
Applicant of	gnature.		Date				
4-H Staff: ı	4-H Staff: I verify that this applicant has completed the adult volunteer orientation and screening process.						
Print Name:		,		01			
i iliiti i idiilio.							
Signature:			Date:				

Return this completed "Training Request and Registration Form" to the instructor or registrar of the course you will be taking. The contact information is in the course announcement.

It is the policy of the University of California (UC) and the UC Division of Agriculture & Natural Resources not to engage in discrimination against or harassment of any person in any of its programs or activities (Complete nondiscrimination policy statement can be found at <a href="http://ucanr.edu/sites/anrstaff/files/176836.doc">http://ucanr.edu/sites/anrstaff/files/176836.doc</a>). Inquiries regarding ANR's nondiscrimination policies may be directed to Linda Marie Manton, Affirmative Action Contact, University of California, Davis, Agriculture and Natural Resources, 2801 Second Street, Davis, CA 95618, (530) 750-1318.