

2019 4-H Career Explorations Registration Form

****Note to Counties:** All information from this registration form must be completed in the online registration database. This hard copy is for county use only. Please upload signed NYS 4-H Code of Conduct and Permission Slip forms to 4-H Online in the State Event Permission Slip and COC fields.

Registration closes June 1st or when programs are full. Registrations that include scholarship applications are due May 1.

Participant Information

Name _____ County _____				Please check all that apply: <input type="checkbox"/> Youth <input type="checkbox"/> Adult Chaperone <input type="checkbox"/> CCE Staff <input type="checkbox"/> Focus Assistant <small>(selected through application process)</small> <input type="checkbox"/> Consent is not granted for participant photos to be used to promote 4-H <input type="checkbox"/> (for county use only) Submitted online app.	
Address _____		City _____	State _____		Zip _____
Home Phone _____		Participant's Cell Phone _____			
Email Address (required) _____		T-Shirt Size _____			
Years in 4-H: <input type="checkbox"/> This is my first 4-H event <input type="checkbox"/> 1st year as a 4-H member <input type="checkbox"/> 2-5 years <input type="checkbox"/> 5+ years Years Participating in Career Ex: <input type="checkbox"/> This will be my 1st time <input type="checkbox"/> This will be my 2nd time <input type="checkbox"/> This will be my 3rd time <input type="checkbox"/> I've been 4 or more times					
Gender Identity: _____					
Ethnicity: Are you of Hispanic or Latino ethnicity? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say					
Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Prefer not to say					
Grade entering in the Fall (youth only): _____					
Chaperone's name (youth only): _____					

Participation Information

We want to help make your experience at the conference the most comfortable and successful it can be. Medical needs such as allergies and conditions such as diabetes, behavioral issues, etc. are critical to include in the database so chaperones have the information. Please let us know if you have housing or mobility needs, too.

Please let us know if you (check all that apply):

Can participate without restrictions or adaptations.

Can participate with the following restrictions or adaptations:

Accessibility Needs: _____

Medical Needs: _____

Mobility Needs: _____

Dietary Needs (circle all that apply): Dairy Free Gluten Free Kosher Vegetarian Vegan Other: _____

Housing Needs: _____

Would like the Event Coordinator to contact you about your participation needs.

Roommate Request: I am requesting to room with _____

Emergency Contact Name: _____

Relationship: _____ Emergency Phone: _____

Cornell Cooperative Extension offers equal program and employment opportunity.

Cornell University is committed to providing universal access to all of our events. Please contact ask37@cornell.edu to request disability accommodations. Advance notice is necessary to arrange for some accessibility needs.

Program Choices

Program Track:

- University U (Youth entering Grades 8-9)
- Focus for Teens (Youth grades 10 or over, or members who have attended UU before)

Focus for Teens Only: Choose your 1st, 2nd, and 3rd choices by writing a number by the program titles below (see program descriptions in Program Facts). Note: University U participants will be randomly placed in a group and visit six different workshops.

- | | | |
|---|--|---------------------------------------|
| — A Tour of Human Development Across the Lifespan | — Fossil Collecting and the Science of Paleontology | — Rockets, Boats, and Robots |
| — Blue Jeans: Creation to Reuse | — I've got something to tell you...Podcasting "live" from Career Explorations 2019 | — Science and Animals Grow Here |
| — Cardiac Engineering: at the Heart of it all | — Learning to Program Robots with Roibu | — So you want to be a food scientist? |
| — Chemical Engineering: From Tiny Particles to Giant Explosions | — Maps, Apps, and Drones: 4-H Geospatial Exploration | — Women in Science |
| — Discover Astronomy | — Media Corps | |

Scholarship Application

There are limited funds for providing scholarships for this event. Scholarships are evaluated on financial need, completeness of application, and demonstrated interest and involvement.

- I will **not** be applying for a scholarship I am applying for a scholarship **County Educators:** I approve this application.

Year of High School Graduation: _____

Family Financial Information

Check the box next to the amount that best describes your family's gross income as may be found on the most recent US Federal Income Tax return:

- \$25,000 or less
- \$25,001 to \$50,000
- \$50,001 to \$75,000
- \$75,001 or more

My family qualifies for Free/Reduced Lunch: no yes

How many dependent children are in your family? _____

How many youth from your household will be attending Career Explorations this year? _____

Scholarship Requested

A full scholarship covers the whole registration fee. If a full scholarship is not available, would you be able to pay for half your registration fee?

- Yes No

Have you received a Career Exploration scholarship in the past?

- Yes No

Are you getting financial support from your county 4-H program?

- Yes No

Do you have other sources of financial assistance for this conference?

- Yes No

Interest and Involvement Please write a sentence or two describing:

Why do you want to come to 4-H Career Explorations?

What do you want to do in the future?

Other Information

What else would you want us to consider when reviewing your application?

Program Policies

By submitting this registration form, I agree to follow all program policies: Youth participants will be assigned a double occupancy room. Parents will be contacted if a youth violates the code of conduct and they need to be sent home at families' expense. Participants are responsible for any damages that occur to the room during their stay. Cancellations after June 11 will be billed a cancellation fee. No shows are charged in full. Any disturbance or emergencies should be reported to a chaperone. Youth substitutes of the same gender and participation in the same program will be accepted after the June 1 deadline. Alcohol, tobacco, and other drug use is strictly prohibited. Participants must be in the dormitory by 10:00 p.m., lights out at 11:00 p.m. All participants (youth and adult) will follow the NYS 4-H Code of Conduct.

Early Arrival / Late Departure

Please indicate need for early or late accommodation. Requests can be made on the online registration form.

Costs: Double Room per night - \$32.00, Single Room per night - \$40.00, Breakfast: \$8.65, Lunch: \$12.60, Dinner: \$16.25

Housing (check all that apply):

- Monday evening double room + \$32.00
- Monday evening single room + \$40.00
- Thursday evening double room + \$32.00
- Thursday evening single room + \$40.00

Meals (check all that apply):

- Monday Lunch + \$12.60
- Monday Dinner + \$16.25
- Tuesday Breakfast + \$8.65
- Tuesday Lunch + \$12.60

Total Early Arrival Fees: \$ _____

Registration Fee

Total cost for participant:

\$260 (registration fee for youth and chaperones) + _____ (early arrival fees) = \$ _____

Note: This amount will be charged to the CCE Association account.

Please note: transportation to and from the event is at the participant's own expense. Some CCE Associations charge additional fees to cover transportation & chaperone expenses.