

W. E. Skelton 4-H Educational Conference Center
Ruritan National Youth Leadership Conference

Statement of Completion

Chaperone Name: _____
(please print)

Chaperone Address: _____
Street/P.O. Box City State/Zip

Chaperone Phone: _____
Day Evenings

Chaperone Email: _____

Date(s) of On-line Training Completion:

Module 1: _____ Module 3: _____

Module 2: _____ Module 4: _____

Chaperone Description: _____

Dates of Upcoming YLC: _____

By signing below I am agreeing to the statement that the above information is correct and complete. In addition, I am agreeing to the statement that I have completed all required online training modules. I understand that falsification of this information could lead to termination of my appointment as a Ruritan National YLC Chaperone. Furthermore, I understand that if I have questions or concerns I should contact the 4-H Center Program Director or the Ruritan National home office.

Signature: _____ Date: _____

Please mail completed form to:

W. E. Skelton 4-H Educational Conference Center
Attn: Ruritan YLC
775 Hermitage Road
Wirtz, Virginia 24184