

Tolland County 4-H Food Revolution Counselor Application Form

Applicants must be 16 years of age or older as of July 20, 2025 to volunteer as a counselor

Please note that ALL participants will be required to follow University safety guidelines for the duration of the program. These guidelines are subject to change.

Name: _____

Age: _____

Home Address: _____

Email Address: _____

Phone Number: _____ - _____ - _____

Availability (circle all that apply): Mon. 7/21 Tues. 7/22 Wed. 7/23 Thurs. 7/24 Fri. 7/25

Partial days may be requested via. email (tolland@uconn.edu). Counselor participation at Tolland County 4-H Program is a career and workforce readiness volunteer experience.

Are you a member of the Tolland County 4-H Program? (Check one) Yes No

If you answered "yes" to the above question:

Club Affiliation: _____

Years in 4-H: _____

Do you have any food allergies? _____

T-Shirt Size (circle one): Adult SM Adult MD Adult LG Adult XL Other _____

Where did you hear about 4-H Counselor Program?

Please write a short paragraph on the following page telling us a little about yourself, any experience working with children (not required) or 4-H and why you would like to volunteer as 4-H Counselor.

Please return this completed application to the Tolland County 4-H office at: 24 Hyde Ave. Vernon, CT, 06066 by Friday June 6, 2025 OR to Tolland 4-H at tolland@uconn.edu. Upon receiving your application, we will contact you with further information. Counselors over the age of 18 are subjected to a background check. Please contact Maryann Fusco-Rollins with any questions at maryann.fusco@uconn.edu or (860)-875-3331.



