



4-H Teen Health Advocate

*Open to all interested youth. Applications due **December 3, 2019!***

4-H Healthy Living Teen Advocates will work with University of Idaho Extension to implement the 4-H Healthy Living Program – nutrition, physical activity, social well-being and community health.

Time Commitment: December 2019 to October 2020.

Requirements for Teen Advocate: A teen advocate must agree to and complete the following tasks:

1. Participate in **monthly** online (Zoom) meetings.
2. Attend state training on January 10-11th in Caldwell
3. With a University of Idaho 4-H staff or Educator, complete **one** of the following:
 - Teach eight nutrition lessons. (Lesson planning and information is provided during state training.)
 - Work on a Well Connected Communities project (Marsing, Caldwell, Preston).
4. Promote healthy living by completing a community project that may include community events. The focus can be on nutrition, physical activity, social well-being, or community health. (See ideas below.)

Benefits for You:

- Receive training on the best healthy living strategies – nutrition, physical activity, social-well-being.
- Volunteer within your community and county, promoting healthy living.
- Gain experience working with younger youth.
- Build leadership skills through new experiences.
- Count hours toward high school community service requirement or senior project.

Required Online Meetings and Training Dates:

- Zoom meeting December 17th and January 7th and other dates to be determined.
- State Teen Health Advocate training, January 10-11, 2020 in Caldwell.

Ideas for Community Project & Promoting Health:

- Map food vendors at your county fair (a project 2018 teen health advocates started.)
- Work on a Well Connect Community project (communities of Marsing, Caldwell, Preston only).
- Train other teens and adults on healthy living and youth-adult partnerships.
- Post healthy living messages to 4-H social media venues.
- Create and post healthy living videos.
- Create a photo journal of healthy snacks and recipes.
- Make a slide show for school announcements.
- Host a healthy living activity center at a fair or community event.
- Organize healthy living activities in conjunction with state, regional, or national events.
- Promote 4-H healthy living at district or state gatherings.
- Connect with other health organizations and work on issues like vaping, texting while driving, etc.
- Map healthy living resources in community – pathways, trails, sidewalks, recreation, food access, grocery stores, convenient stores, farmers markets. etc.

You must meet these MINIMUM QUALIFICATIONS:

- Must be 14 years old at time of application. (Unless involved with Well Connected Communities in Marsing, Caldwell, or Preston)
- Must be in 9th grade or equivalent (home-school or online school).
- Must be willing to participate in online meetings and attend state health advocate training. (See dates above.)
- Be interested in teaching health skills to other youth.
- Respond to texts, phone calls and emails from 4-H faculty and staff.
- No prior healthy living experience is needed.
- Have reliable transportation to get to teaching site(s) and community event(s).

It is great if you also have these DESIRABLE QUALIFICATIONS:

- Experience with 4-H Youth Development.
- Experience as a teen volunteer within your community.
- Basic knowledge/experience in the areas of health and fitness, sports, or nutrition.
- Ability to follow directions, complete assignments and meet deadlines; maintain confidentiality; and work cooperatively with others.
- Ability to speak Spanish fluently (for specific locations).

Application packets are due December 3, 2019.

APPLY to be a Teen Health Advocate:

1. Complete application packet - Part 1 and Part 2.
2. Answer items at end of application and attach as a separate page to application, Part 3.
3. Have parent/guardian sign application.
4. Have your county-based 4-H Coordinator or Extension Educator sign application. (List of county Extension, <https://www.extension.uidaho.edu/find.aspx>)

Email completed application packets as a Word doc or PDF to:

Maureen Toomey, University of Idaho Extension, 4-H Youth Development
1904 E. Chicago Street, Suite A-B
Caldwell, Idaho 83605 | |Phone: 208-454-7648 | mtoomey@uidaho.edu



PART 1

**Application for Teen Health Advocate
Application due **December 3, 2019!**
Submit as a Word document or PDF.**

Name (exactly as it appears on your legal identification):

First

Middle

Last

Name for Name tag: _____ Your Date of Birth: _____

First & Last

Month/Day/Year

Mailing Address: _____

Street

City

State

County

Zip Code

Your Cell Phone: _____ Your Email: _____

Parent Name: _____

First and Last

Parent Cell Phone: _____ Parent E-Mail : _____

University of Idaho Extension Educator or 4-H Coordinator Name: _____

School Name: _____ Current Grade: _____

School Address: _____

Street

City

State

Zip Code

Principal's Name: _____

1. Are you available to attend the Health State Teen Advocate training in your area, **January 10-11** in Caldwell? (4-H will support travel.)

YES NO

2. Are you willing to meet all *Requirements for Teen Health Advocate* listed above? YES NO

3. Do you have reliable transportation to get to assigned teaching site or community event within your community?

YES NO

4. Are you activated in 4-H Online? YES NO

OR, is your parent willing to 'enroll you' or 'activate your profile' in 4-H Online? YES NO

PART 2

Previous work or volunteer experience

Name of Employer/Organization: _____

Name of Supervisor: _____ Phone Number: _____

Address: _____
Street City State Zip Code

Length of Employment/Volunteering (include dates): _____

Position & Duties: _____

Reason for Leaving: _____

May we contact supervisor as a reference: YES NO

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not being accepted as a teen advocate. I authorize the verification of any or all information listed above.

Teen Applicant Signature: _____ **Date** _____

Parent Signature: _____ **Date** _____

4-H Coordinator or Extension Educator Signature: _____ **Date** _____
(From the county where you live)

(Continue to Part 3 and answer questions.)

PART 3

Answer the following questions with complete sentences.

1. Share your interest /experience in health, nutrition, physical activity, sports, outdoor recreation, and/or cooking. If you are bi-lingual list your second language and comfort in speaking.
2. If you are in 4-H, list your 4-H activities that you plan to do this coming year. (KYG, STAC, 4-H Projects, etc.)
3. List your school and community activities or other regular commitments. (sports, student government, FHLA, mayor's youth advisory council, etc.).
4. If you have an idea of what you would like to do for a community health project, please share it here.

The University of Idaho provides equal opportunity in education and employment on the basis of race, color, religion, national origin, gender, age, disability, or status as a Vietnam-era veteran, as required by state and federal laws.