

4-H OSU Career/College Exploration Day

WHO: Scioto, Adams, Jackson, Pike, Lawrence, and Gallia 4-H Teens
WHAT: Career and College Exploration at The Ohio State University
WHERE: Ohio State University Campus, Columbus, OH
WHEN: Thursday, April 25, 2024

The six-county area has received a grant to take a group of 4-H members from southern Ohio on an official tour of the College of Food, Agricultural and Environmental Science and The Ohio State University. The tour will include meeting with ambassadors and staff to talk about potential majors and careers, admissions, university life, lunch in the Ohio Union, and a tour of labs, facilities, possibly dorms and other parts of campus.

Each of the counties are invited to send participants who are interested in learning more about the College and Ohio State, as a whole. We will be taking Ohio State University charter buses and do career exploration activities on the ride to campus. There will be reflection and evaluation on the way home.



4-H Career Exploration Bus Trip to Ohio State

The grant will cover all expenses for the educational bus trip to and from Columbus, as well as lunch and educational materials for all participants.

One bus will pick up students from the Scioto County Fairgrounds at 7:45 a.m., and then will make a stop at the Pike County Fairgrounds at 8 a.m., on the way to Columbus. A second bus will begin at the Gallia County Extension Office at 7:45 a.m. and make a stop at the Jackson County Office around 8:15 a.m. As part of this educational trip, students will be asked to explore potential majors based on their interests and strengths. The bus will return to Pike county by 5:30 p.m. and Scioto County at approximately 5:45 p.m. The second bus will stop in Jackson about 5:15 p.m. and Gallia county approximately 5:45 p.m.

We will need an exact count of students from each county as we are making plans for lunch and supplies. Name, age and county information are due to your county educator by 4:30 p.m., Thursday, April 18. I have included a health form and transportation form that each participant will need to bring with them that day. Chaperones for the trip will include Extension Educators Jo Williams, Abbie Mowen, Erin Dailey, Kristy Watters, Maddie Allman, Rachael Fraley, and Joy Bauman.

If you have any questions, comments or concerns, please contact your 4-H Educator.

Event sponsored by Scioto County 4-H and a grant from the Ohio 4-H Foundation.



HEALTH/ACTIVITY RELEASE FORM

NAME: _____ AGE: _____

PARENT/GUARDIAN NAME(S): _____

EMERGENCY CONTACT NUMBERS: HOME _____

CELLULAR _____ WORK _____ OTHER _____

Please indicate on the lines below any known medical conditions or allergies that the adults in charge of this trip should be made aware of prior to the event.

Statement of Understanding

By signing this statement for participation in the programs of the Scioto County Teen Leaders, you acknowledge that certain activities are physically demanding. Therefore, physical fitness will increase an individual's enjoyment and ability to participate in the activity. If for any reason you question your (or your child's) ability to participate in the activity, please consult with the instructors prior to participation.

While it is impossible to foresee all possible dangers, some of the specific hazards which might be encountered by participants in our Outdoor Education programs and activities, which includes running and jumping during games, slipping or falling, skiing, snow boarding, snow tubing, bumps, bruises, cuts, sprains, fractures or other associated injuries and hazards. Most activities are conducted outdoors, in all kinds of weather, so proper dress may be essential to avoid undue exposure to the elements.

Course instructors will take every reasonable precaution to minimize exposure to known risks, however, as a participant (or parent/guardian of a participant) you acknowledge the nature of the activity and the fact that not all of the stresses and hazards connected with these activities can be foreseen.

Participants have the personal responsibility to follow the established safety rules and procedures to the extent that they participate in such activities. If at any time a participant has questions about an activity, they have the responsibility to consult with the instructor.

"I recognize that there is a significant element of risk in any adventure, sport, or activity associated with the outdoors. Knowing the inherent risks, dangers and rigors involved in the activities, I certify that my family and I, including any minor children, are fully capable of participating in the activities."

Signature _____ Date _____

(Parent or legal guardian must sign for all persons under 18 years of age)



Waiver and Permission to Transport Child/Charge
Ohio State University Extension

Child/Charge: _____

Event: _____ Career Exploration and OSU Campus Visit _____ **Date:** _____ 04/25/24 _____

Location: _____ Ohio State University _____

Driver: _____ OSU Charter Bus Service _____

I give permission for my child/charge ("child") to be transported in a motor vehicle driven by the individual identified to an event at the specified location on the date indicated. I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and is expected to follow the directions provided by the driver and/or other adult volunteers. I understand that participation in the identified event is not a requirement for participation in the county or state 4-H youth development program.

I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to wear their safety-belt while traveling;
- (2) They are expected to respect each other, vehicles that they ride in, and people that they travel with during the trip;
- (3) Riding in a motor vehicle may result in personal injuries or death from wrecks, collisions or acts by riders, other drivers, or objects; and
- (4) They are to remain in their seats and not be disruptive to the driver of the vehicle.

I recognize that by participating in this activity, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

As a condition for the transportation received, I, for myself, my child, my executors and assigns, further agree to release and forever discharge The Ohio State University, its Board of Trustees, The Ohio State University Extension and their agents, officers, employees and volunteers from any claim that I might have myself or that I could bring on my child's behalf with regard to any damages, demands or actions whatsoever, including those based on negligence, in any manner arising out of this transportation. I have read this entire waiver and permission form, fully understand it, and agree to be legally bound by its terms.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

