**2020-2021**

**BELL COUNTY 4-H AMBASSADOR APPLICATION**

**NOTE: All 4-H Ambassador Applicants must complete this form and submit it to the County Extension Office by 5:00 p.m. on Friday, May 8, 2020.**

**Bell County 4-H Ambassador Application Requirements (NEW AND RENEWAL)**

* Application completed and signed
* Recommendation Letter from a 4-H leader or club manager (not County Extension Agent)
* Sign Code of Conduct and Consequences of Misbehavior
* 1 Essay completed (minimum 100 words)
	+ Renewing Ambassador: If selected again as a 4-H Ambassador, what parts of the 4-H program do you think should be promoted?
	+ New Ambassador: Please state why you want to serve as a 4-H Ambassador.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4-H CLUB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GRADE (9th, 10th, 11th, 12th): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NUMBER OF YEARS IN 4-H: \_\_\_\_\_\_\_\_\_

MAIN 4-H PROJECT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT/GUARDIAN NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you previously served as a 4-H Ambassador? \_\_\_\_\_YES \_\_\_\_\_NO

If yes, did you complete all the required activities? \_\_\_\_\_\_ YES \_\_\_\_\_ NO

Do you plan to complete and turn in a 4-H recordbook (DUE June 5, 2020)? \_\_\_YES \_\_\_\_ NO

List your 4-H projects:

Summarize your 4-H leadership experience:

Summarize your non-4-H activities and leadership experiences:

List the honors you have received as a 4-H member:

Summarize your involvement in church, school, and other community organizations.

**Statements/Signatures:**

I will, to the best of my ability, participate in all 4-H Ambassador meetings and activities if selected to serve during the upcoming 4-H year. My signature indicates that I have carefully read, understand, and agree to comply with all of the requirements, and that I make a commitment to fulfill the requirements as a Bell County 4-H Ambassador.

4-H MEMBER’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_

As the Parent/Guardian of the 4-H member, I have carefully read and understand the requirements. I fully agree to support my child in his/her commitment to serve as a Bell County 4-H Ambassador.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_



**2020-2021**



Bell

8