



Buffalo County 4-H Leaders Association

Outstanding 4-H Member Award Application

(Applicant must be 16 or over as of January 1st of the current year.)

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Parents Name & Address _____

Age _____ Grade _____ 4-H Club _____

Projects

List projects and years completed

Project _____	Year _____	Project _____	Year _____
Project _____	Year _____	Project _____	Year _____
Project _____	Year _____	Project _____	Year _____
Project _____	Year _____	Project _____	Year _____
Project _____	Year _____	Project _____	Year _____
Project _____	Year _____	Project _____	Year _____

4-H Activities

List major 4-H activities

Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____
Activity _____	Year(s) completed _____

Leadership Responsibilities (4-H & Community)

Leadership Example _____

Description _____

Leadership Example _____

Description _____

Leadership Example _____

Description _____

Leadership Example _____

Description _____

Leadership Example _____

Description _____

Essay

Describe **one** outstanding 4-H experience in a 100-200 word narrative. (Attach extra sheet if necessary)

Required Signatures

Member: _____ Date: _____

Parent/Guardian: _____ Date: _____

Club Leader: _____ Date: _____

