

4-H AWARD APPLICATION

Cornell Cooperative Extension Ulster County

This form and all reports to be completed by the 4-H member

Must be submitted on or BEFORE September 30

Name: _____ 4-H Age: _____

Club: _____ Years in 4-H: _____

Check off the Award(s) that you are applying for:

_____	<u>5-8 Years Old</u>	Cloverbud	Completion Certificate
_____	<u>All ages</u>	4-H Year Pin	Requires Project Record Summary or Project Record

GOAL SETTING—General

8-11 Years Old

_____ Heart of 4-H
_____ Making the Best Better
_____ Above and Beyond

12-15 Years Old

_____ Heart of 4-H
_____ Making the Best Better
_____ Above and Beyond

16-19 Years Old

_____ Heart of 4-H
_____ Making the Best Better
_____ Above and Beyond

GOAL SETTING - Specialist & County Recognition

_____ Specialist: _____ Area(s)
_____ County Recognition: _____ Area(s)

OTHER

_____ Secretarial Award
_____ Beacon Award

FAMILY AND CONSUMER SCIENE

_____ Fabric Store Gift Certificate
_____ Career Exploration

(over)

General Goal Setting & Specialist Instruction Check-off

Instructions:

Read over the requirements for the award(s) for your application. Requirements are found in the Member Recognition Guide. Complete the Check-off. Review your application with an adult and get the appropriate signatures. Place this 4-H Award Application in the front of your Portfolio/Award entries. Required Project Records go in the back. Turn in to the 4-H Office no later than **September 30**.

- _____ 1. I have updated my 4-H Lifetime Portfolio for this current year.
- _____ 2. I have completed _____ project records this year (include Portfolio)
- _____ 3. I have completed _____ project record stories this year.
- _____ 4. I have completed _____ hours of community service (list in Portfolio).
- _____ 5. I have participated in _____ Educational Events (list in Portfolio).
- _____ 6. I have completed _____ Leadership Activities (list in Portfolio).
- _____ 7. I have completed _____ Public Presentations (list in Portfolio).
- _____ 8. I have completed _____ Evaluation Events (list in Portfolio).
- _____ 9. I have completed these additional requirements for my Award (only for Specialist).

I have personally prepared this application and believe it to be correct.

Signed: _____
4-H Member Date

Signed: _____
Parent/Guardian Date

I recommend this application for approval.

Signed: _____
4-H Leader/Educator Date