ADVISOR NOTE: This form must be completed by each 4-H'er that you nominate for a county award. Please submit these background forms with your nominations annually by August 31

COUNTY MEDAL BACKGROUND FORM

(Current year only)

FORM MUST BE COMPLETED BY MEMBER, IN MEMBERS HANDWRITING

Do not use typewriter or computer!

MEMBER NAME:	
CLUB NAME:	
Participation area (Check all that apply)	Description (details on participation)
Section I: Claration 75% or better meeting/activity participates	
Health and Safety talk given (list subje	ect)
Health program participation (list)	
Fund raising/work day participation (li	st)
Carried out assigned responsibilities	
Outstanding member recognition given	
Section II: Project 100% project completion	ct Achievements
Outstanding exhibits earned (list projec	et areas)
Project clinic attendance	
Demonstration(s) given: list project are	ea(s):
Project related activity (i.e. style review	w, showmanship) (list project area)
Ohio State Fair representative (list proj	ject area)
Section III: Lea Club office or other leadership role (lis	
County officer or other leadership role	(list)

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Service as Junior Leader (list)
Junior Fair Board (current responsibilities)
Camp Counselor (list camp)
Current leadership project completed (list level)
Help/teach project clinic/program (list)
Other leadership roles (list)
Section IV: Citizenship Skills Club community-service participation (list)
County community service participation (list)
Special interest program participation (i.e. CARTEENS, Youth Safety Council)(list)
Awareness Team participation (list)
Dairy Bar/Fairhaven Cafeteria worker
4-H Promotion activities (list)
Recruited new 4-H members (list number)
Assisted another member with project/officer work (list)
Works well with other members and advisors

Section V: County /District/State (list)