

Richland County Leadership Application

APPLICATION DEADLINE: Annually on September 15

to the OSU Extension Office, 1495 W. Longview Ave., Suite 206, Mansfield, Ohio 44906

*This application will not be accepted at the Extension office until the first business day after the county fair ends *

**MUST BE COMPLETED BY APPLICANT. ADDITIONAL PAGES MAY NOT BE ADDED.
APPLICATION PAGES MAY NOT BE ALTERED IN ANY WAY.**

Important: Only report specific activities once under the most appropriate section.

Date Submitted: _____ Main Contact Telephone Number ____ - ____ - ____

Name of 4-H Member: _____ Gender: M or F (Circle one)

Permanent Address: _____
Street City Zip

Email address: _____

Date of Birth: _____ Yrs. in 4-H (including year of application): _____

Name of 4-H Club: _____

Name of School or College: _____ Current Year in School: _____

List any conflicts with the activities listed below and give approximate time frame of conflict: (i.e. sports, band camps, work, etc.):

Have you attended?

Ohio 4-H Teen Conference	YES	NO
State 4-H Leadership Camp	YES	NO

Have you previously served as?

4-H CARTEENS Instructor	YES	NO
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For what award or position do you wish to be considered?

State Leadership Camp	(June or July)	YES	NO
Ohio 4-H Teen Conference		YES	NO
4-H CARTEENS Instructor	(One-year term)	YES	NO

Describe your leadership skills:

List 4-H club participation:

List county/district/state/national 4-H participation (including leadership roles and awards):

List church/school/community participation (including leadership roles & awards):

Why are you interested in serving in this county leadership role?

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The undersigned do hereby verify that all records on this form are completed and correct.

Date: _____ Member: _____

Date: _____ 4-H Club Advisor: _____

Date: _____ Extension Educator: _____

**THIS FORM MUST BE SIGNED BY THE MEMBER AND ADVISOR PRIOR TO
SUBMITTING TO THE EXTENSION OFFICE BY September 15 ANNUALLY.**

All signatures must be that individual's legal signatures.
Any incomplete signatures will not be accepted.

DO NOT ALTER/CHANGE THIS FORM IN ANY WAY.