



EASTERN STATES 4-H TEEN APPLICATION

Selection is based on the information provided in this application, the interview and the recommendation letter.

PLEASE USE ONLY THE LINES PROVIDED ON THIS APPLICATION. DO NOT ADD PAGES.

Please check the teen position in which you would be interested. If both, circle the one you would prefer.

Teen Leader at the horse show *Horse Activity*

Name _____ Phone _____

Address _____ Zip _____

County _____ Club Name _____

Number of years as a 4-H member _____ Number of years as a horse 4-H member _____

Birth date _____ Age as of January 1 of this year _____

How many members in your club? _____ Have you attended as a Teen Leader? yes no

Have you attended Eastern States previously with a horse? yes no If yes, year(s) _____

Why does the position of Teen Leader at Eastern States interest you? (skip this if only applying for Horse Activity)

Why are you interested in the Horse Activity position? (skip this if only applying for the Teen Leader position)

List your qualifications for either position: _____

Section B. 4-H Leadership (20 points)

Score _____

Indicate level of activity: (CL= Club; CO= County; RG = Regional; ST = State; NE = New England; NT = National)

List 4-H leadership activities for the past three years: Mentoring, teen leader etc. (other than list at bottom)

Year	CL	CO	RG	ST	NE	NT	Leadership Activity

List 4-H positions held (offices, committees)

Year	CL	CO	RG	ST	NE	NT	Office held or Committee on which you served

List 4-H Community Service Activities: (If the same activity is repeated more than one year, put all years under the Year section.)

Year(s) Activity

Year	CL	CO	RG	ST	NE	NT	Community Service Activity

Please indicate your participation in the following activities by putting the year on the line:

- _____ Teen Member, 4-H Horse Council _____ VT Teen Congress Teen Board
 _____ 4-H State Day Teen Board _____ Core Leader, Eastern States
 _____ Team Captain for Eastern National 4-H Horse Roundup Team: _____

All information on this application is accurate to the best of my knowledge.

Signature of Applicant

Date

If _____ is approved to participate in the horse show at the New England 4-H program this year, I will assume the responsibility for transportation and give my permission for his/her participation.

Signature of Parent/Guardian

Date

This application must be reviewed and signed by your local 4-H leader and your county office.

Signature of local 4-H leader

Date

Leaders-By your signature, you approve this application and certify the 4-H member is a member in good standing and has met all horse project requirements.

Signature of 4-H Educator

Date

Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, in cooperation with the United States Department of Agriculture. University of Vermont Extension, Burlington, Vermont

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