

DISTRICT 5 4-H COUNCIL OFFICER APPLICATION FORM

Please complete and pages 6-9 to your County Extension agent (due June 12).

Name	Preferred Name		
Mailing address			
	Parent email		
County	Phone number	Gender	□ Male □ Female
Date of birth	Age as of August 31, 2023		_
Grade entering in August 2023	Name of school		
Number of years in 4-H	Name of county Extension agent		
President and 1st VP also serve concur	as President or 1 st Vice President? \square Y rently on the Texas State 4-H Council. If you have; however, you CAN serve in other council of	ave served in th	his capacity in the past,
	es; however, you CAN serve in other council o		
Have you served as a District 5 4	I-H Council Officer in the past? □ Yes	□ No	
If yes, did you attend man	ndatory meetings and events as required	l? □ Yes □	No
Offices you would like to be con	sidered for: (check all that apply)		
 □ President □ 1st Vice President □ 2nd Vice President 		Secretary Council Offic	cer



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Answer the following below – 2 page maximum with a font size of 11 or 12 points.

	EXPERIENCES
LEADERSHIP: Summary of your major 4-H and non-4-H leadership roles (include volunteer, elected/appointed and promotion leadership, showing the most significant first)	EXPERIENCES
CITZENSHIP AND COMMUNITY SERVICE: Summary of your 4-H and non-4-H citizenship and community service activities. List year, activity and your role (show most significant first)	
PERSONAL NARRATIVE: Personal biography of 4-H members' 4-H career and other extracurricular activities (Example: how many years in 4-H, major projects, accomplishments, scholar sports, school/ community activities). No more than 100 words.	



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THOUGHT QUESTIONS			
Why do you want to be a member of the District 5 4-H			
Council Officer Team?			
What does the word "impact"			
mean to you?			
What one thing do you think you could do as a Council			
Officer to improve District 5 4-H?			
What lasting impression do you want to leave on District 5 4-H?			



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CANDIDATE COMMITTMENT

If elected, I agree to fulfill my responsibilities to be the best of my ability and understand that I will be expected to participate in the events and activities listed on page 1 and 2. I understand the Communication and Two-Strike rules as listed on page 1 and 2.				
Candidate Signature	Date			
PARENT VERIFICATION				
I approve of my child's interest in the District 5 4-held to the highest expectations of commitment to	-H Council office and understand that youth will be their elected position as listed on page 1 and 2.			
I support their involvement and will ensure that the of District 5 4-H Council.	ey are actively involved in the events and/or activities			
I approve of the District 5 program posting their n	ame, photo and contact information on their website.			
Parent/Guardian Signature	Date			
COUNTY EXTENSION AGENT VERIFICAT	ION			
I verify that the following individual and parent/graquired for election to a District 5 4-H Council or	<u>.</u>			
County Extension Agent Signature				