Ambassador Application

Year:	Name:
County:	Birth Date:
Address:	City:
Zip:	Phone:
Parents:	High School:
Grade:	GPA:
	vities: (only include those which you feel competent in conducting workshops an iclude the specific skill you could teach in each project or activity.)
Major 4-H and other accomp	plishments: (Examples – offices held, awards received, etc.)
Leadership Abilities: (Exan workshops, talent, etc.)	nples – record keeping, demonstrations, modeling, camp counselor, assist wit
On back please indicate why Parent or guardian signature	you want to be a 4-H Ambassador. of approval: Date:
Later of Summan signature	or approvia.

Ambassador Application

Please describe/indicate why you want to be a 4-H Ambassador.