

MOHAVE COUNTY 4-H LEADERS' COUNCIL
Youth Representative
Nomination / Application Form

NAME: _____ PHONE: _____ AGE AS OF JAN. 1 _____

CLUB: _____ Email Address: _____

I AM ACCEPTING MY NOMINATION TO THE FOLLOWING POSITION ON THE MOHAVE COUNTY 4-H LEADERS' COUNCIL YOUTH REPRESENTATIVE:

If more than 1 Please rank in order of preference.

_____ **Beef**

_____ **Goat**

_____ **Sheep**

_____ **Swine**

_____ **Horse**

_____ **Small Animals**

(Rabbit, Poultry, Pigeon, Cavy)

_____ **Companion Animals**

(Dog, Cat, Reptile Amphibian, Pot Bellied Pig)

_____ **General** (All other projects)

_____ **Family & Consumer Science**

MY QUALIFICATIONS AND EXPERIENCE ARE AS FOLLOWS: _____

I WOULD BE A GOOD YOUTH REPRESENTATIVE BECAUSE: _____

I AM A MEMBER IN THE FOLLOWING PROJECT(S): _____

I UNDERSTAND I WILL:

1. Be expected to represent the 4-H members in the project area(s) in which I am elected;
2. Attend monthly meetings of the Mohave County 4-H Leaders' Council Executive Board; and be an active participant and voting member.
3. I am fourteen (14) years of age or older.

Member Accepting Nomination

Date

Nominating Leader

Date