

# Barton County 4-H Ambassador Application

**Return this application and a signed letter of recommendation (in a sealed envelope)  
to the Cottonwood Extension District – Great Bend Office  
By: October 15, 2019**

Ambassadors need to be interested in public speaking and making presentations in front of groups.

To qualify as a 4-H Ambassador, applicants must:

- Presently be in the 9th grade through the 12th grade,
- have completed two or more years of 4-H,
- agree to record a radio show or give a presentation to support 4-H each year
- be interviewed by judges to discuss your application,
- be willing to attend Ambassador training at Rock Springs Ranch in 2018.

Name \_\_\_\_\_

Member Cell Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Grade in school \_\_\_\_\_ Years in 4-H \_\_\_\_\_

Member e-mail \_\_\_\_\_ Parents' e-mail \_\_\_\_\_

Primary 4-H Projects enrolled in:

**ON A SEPARATE PIECE OF PAPER, PLEASE ANSWER THE FOLLOWING QUESTIONS:**

1. What leadership activities have you been involved in and what leadership positions have you held?
2. If selected as an Ambassador, what things about the Barton County 4-H program do you think should be promoted, and **how** would you promote the things you listed?
3. Please describe your participation in you 4-H Club this past year. (# meetings attended, office held, etc.) How has your participation in 4-H benefitted you? Describe one or two of the most important ways.
4. List **three** adjectives that describe you and tell **why** they describe you.
5. Why do you want to be a Barton County 4-H Ambassador? (50 words or less)
6. One of the expectations of becoming an ambassador is to make a commitment of time to carry out the 4-H Ambassador role including: attending 4-H events and giving at least one radio program and one presentation. Are you willing to make this commitment?

I have read the qualifications to serve as an ambassador and will participate fully.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Date*

I have read and approve of this application.

\_\_\_\_\_  
*Signature of 4-H Adult (Community Leader or Project Leader)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Title of 4-H Adult*

**Return:**

- 1) A completed and signed application**  
and a
- 2) A signed letter of recommendation in a sealed envelope**

To the Cottonwood Extension District- Great Bend Office  
**October 15, 2019**

Cottonwood Extension District  
Great Bend Office  
1800 12th  
Great Bend, KS 67530  
620-793-1910