



MONTANA 4-H AMBASSADOR APPLICATION

Name: _____

County: _____ Birth Date: _____

Address: _____ City: _____

Zip: _____ Phone: _____

Parents: _____

Grade: _____ GPA: _____ High School: _____

Major 4-H Projects and Activities: (Only include those which you feel competent in conducting workshops and giving instructions to others. Include the specific skill you could teach in each project or activity.)

Major 4-H and other accomplishments: (Examples – offices held, awards, etc.)

Leadership Abilities: (Examples – record keeping, demonstrations, modeling, camp counselor, assist with workshops, talent, etc.)

On back please indicate why you want to be a 4-H Ambassador.

Parent or guardian signature of approval: _____ Date: _____