

Youth Representative Application

Must be 14 as of January 1st

Complete this application and return to the Jackson County Extension Office by **February 17th**

Please check which youth representative position for which you are applying

4-H Advisory Council

Horse Committee

Livestock Committee

Name _____ Age as of Jan. 1st _____

Parent's (guardian) name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Organizations you belong to 4-H FFA OTHER _____

4-H Club, Chapter, or other organization: _____ No. of years as a member _____

Project(s) that you will be taking this year:

Please answer all of the following questions:

What do you believe to be the main purpose of the committee for which you are applying?

Why do you want to be a youth representative on this committee?

Please describe what you believe to be some of the responsibilities of this particular committee's members.

*****Please read the following statements carefully*****

Committee Member Youth Representative Commitment

If selected, I promise to uphold, to the best of my ability, the philosophy of this committee. I understand, or will seek to learn, the responsibilities of my membership. I will commit to the activities and meetings of this committee and will participate accordingly. I further understand that my position with the committee may be terminated if I fail to comply with this commitment.

Signature _____ **Date** _____

Parent Approval

As a parent of the youth completing this application, I understand the importance of my child's role as a youth representative on this committee. I give permission to my child to participate in committee activities and meetings.

Signature _____ **Date** _____

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Roger Rennekamp, Associate Dean and Director, Ohio State University Extension. For Deaf and Hard of Hearing, please contact Ohio State University Extension using your preferred communication (e-mail, relay services, or video relay services). Phone 1-800-750-0750 between 8 a.m. and 5 p.m. EST Monday through Friday. Inform the operator to dial 614-292-6181.