#### 2019-20 MARIPOSA COUNTY 4-H LEADERSHIP TEAM APPLICATION

- 1. The Leadership Team is a training program for 4-H teen members who wish to gain additional experience in leadership and public speaking. The teen members will work with an adult leader advisor which is selected by team with 4-H Council's approval.
- 2. Selection Criteria:
  - Minimum of 13 years of age or completed 7<sup>th</sup> grade during year of application.
  - Completed at least 1 year of 4-H membership and project experience with written records.
  - Demonstrated leadership skills such as junior/teen leader, officer, council rep, with written report, etc.
  - Applicant should have demonstrated public speaking skills within the last 12 months.
  - Achieved or working toward Bronze Star rank by the time of application.
- 3. Member will show in written application:
  - Experience in leadership, public speaking and citizenship/community service.
  - Active interest in project, club and county-wide 4-H events and activities.
  - A strong interest in continuing in the 4-H program.
- 4. Written application to include:
  - Application form.
  - Current Year Summary.
  - Letters of recommendation from Community Club Leader (unrelated to applicant and teacher, counselor, pastor or other community person unrelated to applicant).
- 5. A selection committee will be appointed by 4-H Council (a minimum of 5 leaders from different clubs) to review the applications. Applicants will have an oral interview with the selection committee and be asked questions from a standard list and evaluated using an evaluation sheet.
- 6. Responsibilities-
  - Leadership Team appoints advisor(s) to be approved by 4-H Council.
  - Attend Leadership Team orientation and planning meetings throughout the year.
  - Attend Central Youth Summit.
  - Assist the All Star/Ambassador Team, 4-H Thrive Management Team, or event chairperson with county 4-H events such as Achievement Night, Presentation/Favorite Foods Day, Fashion Revue, Junior/Teen leader training, Kid's Night, Teen Night, Judging day, and Ironstone Concours d'Elegance. Team members must participate in at least 80% of activities.
  - If possible, participate in a Public Speaking project.
  - Attend one Board of Supervisors meeting and provide a report to Leadership Team Advisor(s).
  - Plan and present a session at Central Youth Summit with the All Star Team. Central Valley Summit
    restricts the number of leadership team members (10th grade & up) to five attending, so all team
    members may not be part of the session presentation team. If not in 10th-12<sup>th</sup> grades, team
    member will attend as a Central Youth Summit delegate.
  - Promote 4-H activities at the club and county level.
  - Set an example and challenge the younger members to work toward the goals of 4-H & Star Ranks.
  - Complete a record book and 80% attendance for club and project(s) for the current year.
  - Leadership Team term: October 1 through September 30.
- 7. Costs: Mariposa County 4-H Club Council supplies each Leadership Team member with a team shirt and members will wear black or khaki pants. Registration fees will be covered for team members presenting session at Central Youth Summit. Council covers the registration fees for team members ages 13-19 to attend State Leadership Conference once.

### MARIPOSA COUNTY 4-H LEADERSHIP TEAM APPLICATION

Completed written application is due to the 4-H Office by June 30 by 5:00 pm. Applicants will

be invited to an interview as part of the selection process. Interviews will be take place at the 4-H office; date & time to be announced. Term will be October 1-September 30. Club Address Phone number \_\_\_\_\_ Number of years in 4-H \_\_\_\_ Current Star Rank \_\_\_\_ Age on December 31 of current school year School attending \_\_\_\_\_ Present grade in school \_\_\_\_\_ I would like to be on the 4-H Leadership Team because: (minimum of 150 words- use backside if needed)-**Statement of applicant:** I meet the selection criteria as outlined in the Mariposa County Leadership Team Information sheet. I am aware of the responsibilities, time involvement and costs described. I understand that I am responsible for completing the year with the Leadership Team or 4-H Council may ask me to repay all or a portion of my Central Youth Summit registration fees. I am willing to be interviewed by the selection committee. I will be prepared to talk about my involvement in 4-H and my future plans. Date\_\_\_\_\_\_, 20 Signature of applicant **Statement of parent or guardian:** I will support my son/daughter if he/she is selected as a member of the Mariposa County 4-H Leadership Team. I am aware that there may be non-reimbursed expenses for transportation for my son/daughter to complete the team responsibilities. I understand that my son/daughter is responsible for completing the year with the Leadership Team or 4-H Council may ask me to repay all or a portion of his/her Central Youth Summit registration fees. Signature of parent or guardian

## MARIPOSA COUNTY 4-H LEADERSHIP TEAM APPLICATION CURRENT YEAR SUMMARY

Name
Tell a little about your 4-H experience during current year-
Tell about your projects and goals for 2019-20 year-
Are you a Junior or Teen Leader? Yes No If so, what projects?
Show your activities outside of 4-H in school and the community.

DUE DATE: June 30<sup>th</sup>

### 4-H LEADERSHIP TEAM APPLICATION Statement of Recommendation

(not family members)

Youth Candidate's	County
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The above named individual has applied for the 4-H Leadership Team Program administered by the University of California Cooperative Extension. We would appreciate your evaluation to assist in the selection process. Please complete all sections. Because this form may be copied, we would appreciate typed responses to the narrative questions 1, 2, 3, and 6. You are under no obligation to provide a copy of this letter to the applicant. **Please complete this statement privately and honestly and return to the office by June 30.** Return this application in the envelope provided, seal the envelope, and sign your name across the sealed flap.

### **Purpose of the Leadership Team Program**

The purpose of the Leadership Team program is to provide an opportunity for 4-H members to focus attention on personal achievements in project, activity and leadership fields and to be recognized for these achievements with the highest rank that a 4-H member can attain on the county level.

### Responsibilities of Leadership Team

- Provide working leadership for some county and regional activities such as Presentation Day, Junior/Teen Leader Workshop, 4-H Livestock Judging Contest at fair, Achievement Night, and Central Youth Summit.
- Attend State 4-H Leadership Conference, and Central Youth Summit.
- Set goals and plan new programs/activities for County and/or region.
- Be available to speak or to represent 4-H to local clubs, organizations, etc.
  - 1. In what ways have you been associated with this candidate?
  - 2. How long have you known the candidate?
  - 3. Observations:
    - a) What do you think are the candidate's greatest strengths? What do you think are the candidate's greatest weaknesses?
    - b) As you observe this nominee in relationship to other people, how would you describe this person?
    - c) How does applicant react to stress, deadlines, awkward and embarrassing situations, and meetings with youth, adults, and strangers?

# Statement of Recommendation (continued) (not family members)

Applicant's Name											
Applicant's County											
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Highly (1)	G000	Good (2) Okay (3)					Doubtful (4) Personal				
rating of the applica	nt (circ	le for	each cl	naracter	istic)						
rating of the applical	High	101	04011 01	14140101	Fair					Low	
Leadership	1	2	3	4	5	6	7	8	9	10	
Citizenship	1	2	3	4	5	6	7	8	9	10	
Attitude	1	2	3	4	5	6	7	8	9	10	
Personality	1	2	3	4	5	6	7	8	9	10	
Enthusiasm	1	2	3	4	5	6	7	8	9	10	
Cooperation	1	2	3	4	5	6	7	8	9	10	
Dependability	1	2	3	4	5	6	7	8	9	10	
Responsibility	1	2	3	4	5	6	7	8	9	10	
Motivation	1	2	3	4	5	6	7	8	9	10	
Judgment	1	2	3	4	5	6	7	8	9	10	
<b>Public Speaking</b>	1	2	3	4	5	6	7	8	9	10	
Comments (use another others, level of self-c be helpful to the selection)	onfider	nce an	d poter					•			
Name (Please Print)_											
Company, Organization, School					Position						
Email	Phone number										
Signed						_ D	ate				