## **Position Description State KAP Evaluation**

**Purpose:** To contribute to the selection process of the State Kansas Award Portfolio winners.

**Locations**: (Please Select)

Again in 2017 we will be evaluating KAP's all electronically. Evaluators will sign a confidentially statement and receive additional information on how to score the KAP's. Each project area will have 3 individuals evaluate each KAP and video individually. The scores will then be added together to decide on the winner for the KAP Project Area.

## Skills and Knowledge and Requirements:

- Previous experience of evaluating 4-H awards
- Ability to be fair and objective
- Committed to applying the 4-H KAP criteria for the selection process
- Access to reliable internet and technology

## **Department of 4-H Provides:**

- Notification to selected 4-H scholarship evaluators
- An orientation for evaluating 4-H Kansas Award Portfolios

## **Nomination Form**

Name:			Volunteer _	Agent		
County/District:		Phone:		W_	_H_	C
Complete Mailing Address:						
E-mail:	City	State		Zip Code		
Why do you want to evaluate 4-H Ka Please include project areas you wou			ease provide	your q	<sub>l</sub> ualif	ications
Volunteers ONLY complete this section	• Years of: 4-l	H leadership	county/dis	trict jud	ging:	
Have you serve on the local Extension Un	it's Trips and A	Awards Commit	tee? Hov	w many	years'	?
Have you judged state award before?						
Approved, Extension Agent		Signatu	ature of Volunteer			

Due to the State 4-H Office by January 15, 2017