

Date received in

\_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_

By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Kansas 4-H Ambassador Action Team Application**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street/Route/Box City State Zip

\_\_\_ Adult *Three year renewable term*

\_\_\_ Staff *Three year renewable term*

\_\_\_ Teen \_\_\_\_ (age as of 1/1/ current year) *One or two year renewable term*

***\_\_\_\_*** One year teen term \_\_\_\_ Two year teen term

Adult Volunteer Screening Completed (required for appointment to team, with the exception of KSRE specialists and agents)

\_\_\_\_Yes \_\_\_\_ No

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone (if it is acceptable to call) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_ Join this Action Team for **first time** \_\_\_\_ **Renew** my term on this Action Team

Please respond as fully as possible to the following items. Attach additional pages

as necessary. (*If renewing, please skip to question #7.)*

1. Summarize your experiences serving 4-H Action Teams or examples of leadership you have provided in 4-H.

2. Summarize your experiences in program development and evaluation in 4-H or other related organizations (example - 4-H Program Development Committee, school board, civic groups).

3. Share an example of a creative or innovative contribution you have made in some aspect of 4-H or other educational setting.

4. Have you received any formal education or training in one or more of the following fields?

Check those that apply.

\_\_\_\_Pre-school education

\_\_\_\_Elementary education

\_\_\_\_Secondary education

\_\_\_\_Adult education

\_\_\_\_Other

(please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_No formal training

5. Why are you interested in serving on this 4-H Action Team?

6. Will you be a member of any other state Extension or 4-H committees or Action Teams during the coming year?

\_\_\_\_Yes \_\_\_\_No

If Yes, what state Extension/ 4-H committee or Action Team?

*For those applying for a renewal term*

7. Why do you wish to rejoin the Action Team?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature, Date

*NOTE: As the KSRE Extension Agent signing this application - For adults, I verify the candidate has been volunteer screened in his/her local Extension Unit, and is a current appointed volunteer 4-H leader in his/her county/district. For youth, I verify the candidate is a current active 4-H member.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Extension Agent Signature, Date

**Return to your local Extension Office to be submitted to:**

**Beth Hinshaw** **bhinshaw@ksu.edu**

**Kansas State University Agricultural Experiment Station and Cooperative Extension Service**

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