

GAE4-HA Outstanding Program Assistant

Do not exceed two page application

Name of Nominee_____

Name of Person Submitting Award_____

County_____ District_____

Address_____

Phone_____

Number of Years as a 4-H Program Assistant_____ Hours Per Week_____

Is there a 4-H Agent, Associate, or full time exempt faculty/staff in the County?: _____

Please list Program Assistant Responsibilities within Core Programming.

(Responsibilities in Core Programming: 15%)

Please list Program Assistant Contributions to programming outside of core events (judging teams, after school, conferences, etc.). **(Responsibilities outside Core Programming: 15%)**

Please list significant leadership responsibilities within 4-H programming and community involvement. (**Significant Leadership Responsibilities: 35%**)

Please list awards and accomplishments. (**Accomplishments: 35%**)