

GAE4-HYDP Outstanding Program Assistant

Do not exceed the two-page application

Name of Nominee: _____

Name of Person(s) Submitting Award: _____

Email Address of Person Submitting Award: _____

Nominee's Demographic Information:

Email Address: _____

County: _____ District: _____

Address: _____

Phone: _____

Number of years as a Program Assistant: _____ Hours Per Week: _____

Please list responsibilities within core base programming. **(Responsibilities in core base programming: 15%)**

Please list contributions to programming outside of core events (judging teams, after school, conferences, etc.).
(Responsibilities outside core base 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%)**