



FRIEND OF 4-H AWARD

4-H Club Name

4-H Year

The purpose of this award is to recognize a person, group or business who has a long tradition (four years or more) of support to the Neosho County 4-H program.

Name of nominee: _____

Title of nominee: _____

Contact for more information about this nominee:

Address: _____ Phone: _____

Years as a: Community Leader _____ Project Leader _____ Supporter _____

Club(s) they were associated with _____

_____ Years as a 4-H Member in _____ county.

Other role/type of support or leadership this person has given: _____

What has this person done to merit this recognition?

_____ Monetary support:

_____ Services provided to support the 4-H program:

_____ Project training support:

_____ Leadership given:

Special honors or awards received? 4-H _____ Other _____ (list)

Memorable experiences during years as a leader:

Family: spouse, children and years of 4-H membership: where they are now and what they are doing.

Anything else you think is relevant:



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