WASHINGTON STATE 4-H ADVISORY BOARD

Teen Nominee Application and Statement (rev 10/20/16)

			Return by September 1 to:				
County			Washington 4-H Council				
Date Parent/Guardian Signature County 4-H Council President's Signature			c/o Tony Dell WSU Puyallup 2606 W Pioneer Puyallup, WA 98371-4998 email: adell@wsu.edu				
				County 4-H Agent/Program	m Assistant Signature		
				Position applying for:	(circle one)		
Northwest	Southwest	Northeast	Southeast				
Name:							
Address:							
			Phones:				
Email:							
Number of years as a	4-H member:	V	Vhere?				
	(Please limit remarks t	o this side of pag	ge only.)				
Jobs performed for Co	ounty 4-H Program:						
Other 4-H jobs held:							
Why do you want to b	be a member of the State	te 4-H Advisory E	Board?				
What do you hope to	contribute or achieve a	s an Advisory Ro	pard member?				
what do you hope to	contribute of acriteve a	is all Advisory De					
-							
Other comments:							