



Extension
UNIVERSITY OF WISCONSIN-MADISON
EAU CLAIRE COUNTY

Nomination Form

Please place this form and required documents in the **FRONT INSIDE POCKET** of your Record Book.

This portion is completed by 4-H Member

Your Name: _____

Your Club Name: _____

LAST GRADE completed: _____ Email: _____

Would you like to be considered for the Wisconsin 4-H Key Award? Yes ____ No ____

If so, include the following with this form:

☐ COVER LETTER

☐ RECOMMENDATION LETTER

☐ PERSONAL RESUME

☐ YOUTH LEADERSHIP PAGE IS INCLUDED IN YOUR RECORD BOOK

4-H Member Signature: _____ Date: _____

By signing above, I confirm that I have included all the requirements listed above for the award and I am an ACHIEVING 4-H Member.

This portion is completed by the 4-H Club or Project Leader for youth who have completed at least 8th grade.

I would like to nominate this 4-H Member for a county level award in the area(s) of:

☐ Achievement, Citizenship, and Leadership (Certificates, Pins, or Both)

☐ Selection of Farm Bureau Outstanding Youth Awards (Agriculturally Related)

☐ Selection of "I Dare You" Awards (Sponsored by OYC - Older Youth Council)

4-H Leader Signature: _____ Date: _____

By signing above, I confirm that this member's RECORD BOOK has been REVIEWED by 4-H Member's General Club Leader and/or Committee, a Youth Leadership page is included in the member's Record Book, and my recommendation letter is included. (Please note, the recommendation letter the 4-H member submits does not have to be from the 4-H Leader submitting the request for a county level award.)

This Record Book is being selected by your club for county recognition.

☐ 3rd through 5th Grade 4-H Record Book County Recognition

☐ 6th through 8th Grade 4-H Record Book County Recognition

4-H Club Leader Signature: _____ Date: _____

Include page 2 if you would like to apply for a scholarship or funds.

Updated 10/2021

Nomination Form, page 2

_____ is requesting funds from the Leaders Association.

*The scholarship and funding request portion of the Nomination form is applicable for events applied for during the current 4-H year; the Leaders Association will cover up to 1/3 of the cost of the experience/opportunity. Nominations forms can be turned in by the **second Tuesday in September** and by the **third Tuesday in January**. Nomination forms can also be turned in on an as-needed basis; funding will be determined based on funds available for that 4-H year.*

Please refer to the Nomination Form Guidelines for Eau Claire County 4-H and the ECC-Chart of Teams/Experiences/Awards found on the Extension Eau Claire County Website for more information.

To apply for a scholarship for an Educational Experience(s) (4-H Trip), complete this section.

Education Experiences include Summer Academy @ UW-Madison, American Spirit Experience-East, CWF - Citizen Washington Focus in Washington D.C., National 4-H Congress in Atlanta, Ga., National 4-H Conference in Washington D.C., International Exchange, CWF-Presidential Inauguration, and Space Camp Counselor.

What 4-H Educational Experience are you requesting the scholarship for? _____

Include the following with this form:

☐ COVER LETTER

☐ RECOMMENDATION LETTER

☐ PERSONAL RESUME

☐ YOUTH LEADERSHIP PAGE IS INCLUDED IN YOUR RECORD BOOK

4-H Member Signature: _____ Date: _____

By signing above, I confirm that I have included all the requirements listed above for the scholarship and I am an ACHIEVING 4-H Member. My prior year's record book with above documents will be turned into the Extension Office by the second Tuesday in September and/or the third Tuesday in January.

To request funding for an Educational Opportunity(s), complete this section.

Education Opportunities include, but are not limited to, State Art Groups (4-H Drama Company, 4-H Art Team, 4-H Communications Team), Space Camp, Fall Forum, Art Camp, and ArtBeat.

What 4-H Educational Opportunity are you requesting funding for? _____

Include the following with this form:

☐ COVER LETTER (include the name and total cost of educational opportunity, a youth leadership experience you led/facilitated during the past 4-H year, and 4-H involvement)

4-H Member Signature: _____ Date: _____

By signing above, I confirm that I have included all the requirements listed above for the funding request and I am an ACHIEVING 4-H Member. The nomination form and cover letter will be turned into the Extension Educator at the Extension Office or via email to Rachel.hartbrinson@wisc.edu by the second Tuesday in September and/or the third Tuesday in January.
