4-H Teen Leadership Academy
Class of 2024-2025
Caldwell County Cooperative Extension Service
1025 US Hwy 62 W. Princeton, KY 42445

(270) 365-2787

rjewell@uky.edu

Completed application should be returned to CCMS Office or Caldwell County Extension Office

The deadline to turn in applications is October 4th

Full Name_____

Date of Birth _____   Male _____   Female _____

Address _____

City _____   State _____   Zip Code _____

Home Phone # _____   Cell Phone # _____

E-mail address (*most often used*) _____

Grade in 2024-2025 School Year _____   Shirt Size _____   Years in 4-H _____

Parent/Guardian Name _____

* By signing below, I <u>will</u> make a commitment to attend all sessions of the

4-H Teen Leadership Academy Program. *

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

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REFERENCES: *Please provide contact information for two references that are NOT related to*

you.

1. _____
   Name   Address   Phone #

2. _____
   Name   Address   Phone #

FOR OFFICE USE ONLY: **APPLICATION # _____**

Please answer the following questions (attach additional sheet if more space is required):

1. **Using a few phrases or adjectives, describe yourself:**

_____

_____

2. **List your leadership experience, not just in 4-H, but in all arenas.**

_____

_____

_____

3. **What three things concern you most about life in your county?**

_____

_____

_____

3. **In a short paragraph, describe the following: "If you could change anything about your community, what would it be and how would you change it?"**

_____

_____

_____

5. **Why do you feel you would be a good candidate for the 4-H Teen Leadership Academy?**

_____

_____

_____

6. What do you want to get out of this Teen Leadership Program?

_____

_____

_____

Additional space for you to tell us anything you want us to know about you - things that would help in the decision making for delegate selection.

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