Arkansas 4-H Hall of Fame Nomination Form

Name of Nominee:
☐ Mr.  ☐ Miss  ☐ Mrs. ____________________________ ____________________________ ____________________________
                                      First                                   Middle                                  Last Name

Name Used   ____________________________________________

Club       ____________________________ County       ____________________________ Date

Date of Birth   ____________________________ Age   ____________________________ Grade in School: High School   ____________________________ Or College   ____________________________

Number of Years in 4-H Completed   ____________________________

Parents or Guardian’s Name   ____________________________________________

Address   ____________________________________________
                                      Street or Route   ____________________________ City   ____________________________ Zip Code

1.  4-H Accomplishments (20 points)
   List the nominee’s 4-H accomplishments, which indicate achievement at the highest level in the club, county, state, and nation.

   ____________________________________________

   ____________________________________________

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2. Assistance to Others (20 points)
   Explain how the nominee has used personal 4-H accomplishments to help others achieve.
3. Leadership and Contributions to 4-H (20 points)
   Explain how the nominee has provided outstanding leadership to 4-H and made significant contributions to the 4-H program at the local, county, state and national level.
4. Commitment to 4-H (20 points)
   Give examples that show the nominee’s strong commitment to 4-H.
5. Integrity and Conduct (20 points)
Provide information related to the nominee's character, attitude, ability and work with others, conduct, worthiness of being named to the Arkansas 4-H Hall of Fame.
| ATTACHMENTS: |
| Please submit the following items with this application |
| a) 8 to 10 color digital photos (action shots) depicting 4-H'er involved in project work, leadership activities, or community service. |
| b) Color or black and white digital photo (head and shoulder shot) for publicity purposes. |

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Date

Due in the state FY4-H office by April 1

The Arkansas Cooperative Extension Service offers its programs to all eligible persons regardless of race, color, national origin, religion, gender, age, disability, marital or veteran status, or any other legally protected status, and is an Affirmative Action/Equal Opportunity Employer.