**PIERCE COUNTY 4-H**

**ADULT RECOMMENDATION**

The following applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is applying to represent the Pierce County 4-H program on an out-of-county trip and/or to be selected as a 4-H Award recipient. You have been identified as a person who could speak to their qualifications for these trips and awards. It is the responsibility of the youth leader to see that you receive this recommendation at least 2 weeks prior to the due date along with a pre-addressed envelope. Recommendations are confidential and will not be returned to the 4-H youth leader. A recommendation from a family member will not be accepted.

Please complete the following recommendation and return as directed below.

1. *Today’s Date Completed:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Name:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Phone:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Email:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Do you feel this member would be a good representative of Pierce County 4-H if selected as a delegate on a 4-H trip, or as a Key Award winner?* \_\_\_\_ Yes \_\_\_\_\_ No

*How long have you known this 4-H member?* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*In what capacity do you know this member?* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Evaluate the Member** | **Poor** | **Fair** | **Good** | **Excellent** | **N/A** |
| Involvement in 4-H at Club level |  |  |  |  |  |
| Involvement in 4-H at County level |  |  |  |  |  |
| Involvement in School & Community |  |  |  |  |  |
| Works to the best of their ability |  |  |  |  |  |
| Dependability |  |  |  |  |  |
| Communication |  |  |  |  |  |
| Leadership Skills |  |  |  |  |  |
| Ethics |  |  |  |  |  |
| Solving Problems |  |  |  |  |  |
| Independence and Maturity Level |  |  |  |  |  |

1. Comments:

Signature of Adult Recommending 4-H Youth Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Recommendations should be sent directly to:**

Pierce County UW-Extension Office

4-H Trip and Award Recommendation

412 S. Kinne St.; BOX 69

Ellsworth, WI 54011

**DEADLINE DATE: November 17**