

4-H LEADER EVALUATION AND RECOMMENDATION FORM FOR 4-H MEMBER COMPLETING ME FORM

Instructions for member: Fill out the top two lines and give this to a 4-H club leader, project leader, or activity leader who has worked closely with you. It should not be filled out by a relative.

Member's Name: _____ Date given to leader: _____

Name of leader completing form: (please print) _____

Instructions for leader: **Please complete and return this form in a sealed envelope to member or send to the Extension Office by September 2, 2008.**

Leader should complete:

Trip(s) leader feels this member should be considered for (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Citizenship Washington Focus
<input type="checkbox"/> National 4-H Congress
<input type="checkbox"/> Superior Days
<input type="checkbox"/> State Arts Leadership Lab
<input type="checkbox"/> Winter Camp | <input type="checkbox"/> WI 4-H & Youth Conference
<input type="checkbox"/> Co-op Y.E.S. (Youth Educational Summit)
<input type="checkbox"/> Horse Leaders Conference
<input type="checkbox"/> Other: _____ |
|---|--|

Use the following definitions in rating the member on areas A-D listed below:

- | | |
|---|---------------------------------------|
| 1. Always does less than expected or required. | 3. Does what is expected or required. |
| 2. Sometimes does what is expected or required. | 4. Does more than is expected. |
| | 5. Consistently exceeds expectations. |

Please check the most appropriate rating

- A. Project work - attends project meetings, completes project work to best of ability.
- B. Participates in club meetings and activities.
- C. Leadership in club projects and activities (youth leader, committee chairman, officer, sub-committee chair, helps at project meetings, etc.)
- D. Attitude/Enthusiasm/Cooperation in 4-H work

1.	2.	3.	4.	5.

On the back of this paper, please include a statement indicating why you, as a leader, feel this member is worthy of consideration for a trip. Be specific in citing their 4-H accomplishments and contributions to the club and county 4-H program.

Do you want the member to receive a copy of this form? Yes No

Leader's Signature: _____

Leader Role: _____ Date: _____