Wabaunsee County 4-H Ambassador Renewal Application Please submit to the Wabaunsee County Extension Office by 5:00 p.m. on July 1.

Name	Club
Number of Ambassador meetings held during	previous year
Number of meetings attended	
Number of Highway Clean-up Activities held	during the previous year
Number of Highway Clean-up Activities attended	ided
Rate yourself 1(needs improvement) to 5 (exce County 4-H Ambassador Program	ellent) regarding your involvement in the Wabaunsee
Came to meetings and activities with work cor	mpleted prior to event
Completion of activities assigned	
Followed instructions	
Participation during meetings	
When necessary to miss a meeting, notified Acand asked for meeting information	dvisor
Worked well as a group, involving all team me	embers
3. I want to continue the second year of m	most through the Ambassador program are ny term because ar of my term might be limited by
I have personally prepared this application and	d believe it to be true and an accurate reflection of me.
Member Signature:	Date:
Parent/Guardian Signature:	Date:



Wabaunsee County 4-H Ambassador **Commitment Form**

Name:	Club:
1. I will attend at least 75% of all n	neetings.
2. I will attend majority of the high	away cleanups held.
3. I will attend at least 1 Ambassad	lor sponsored leadership, educational, or team building activity.
4. Along with the Ambassador Tea	m, I will lead a 4-H promotional event.
5. I will do my part in Making the	Best Better.
As a 4-H Ambassador, I am agreeing to	the 5 listed commitments.
Member Signature:	Date:
As a Parent/Guardian of a 4-H Ambassa	ador, I will support them in fulfilling the 5 listed commitments.
Parent Signature:	Date:

