

ADULT RECOMMENDATION FORM

(NOT A PARENT OR RELATIVE)

Name of 4-H Member _____

As part of the selection process for Chippewa County 4-H Awards and Trips, the selection committee is seeking recommendation and information for candidates. Please give us your input regarding the following areas:

Area	Excellent	Good	Fair	Poor	Unknown
Leadership Qualities					
Maturity					
Participation in 4-H Program					
Responsibility					
Positive Attitude					

Please share why the applicant is deserving of the 4-H award or trip. Describe the applicant's leadership skills (i.e.: communication, self-confidence, teamwork, time management, responsibility, etc.) and qualities as a youth leader as well as any additional information that would be helpful to the selection committee. Use the back if more space is needed.

Signature of adult recommending 4-H youth leader: _____ Date _____

Recommendation must be sent directly to:

Chippewa County UW Extension Office
4-H Award and Trip Recommendation
711 N. Bridge Street, Room 13
Chippewa Falls, WI 54729

Deadline Date: November 1st