

FALLS COUNTY STAR APPLICATION
Silver Star

NAME: _____

ADDRESS: _____

AGE _____ CLUB: _____ NUMBER OF YEARS IN 4-H _____

PARENTS' NAMES: _____

HAVE YOU EVER RECEIVED THIS AWARD BEFORE? _____ YES _____ NO

CHECK THE FOLLOWING ITEMS THAT APPLY TO YOU:

- _____ Completed a record book this year.
_____ Completed two different projects during my 4-H career.

ACTIVITIES:

_____ Method Demonstrations/4-H Presentations, _____ Contests, _____ 4-H Promotion
_____ Project Exhibits, _____ Camps, _____ Other (list) _____

LEADERSHIP:

- _____ Officer or committee chairman at club, county, district or state level
_____ Served as junior or teen leader in an activity or project with or under supervision of an adult volunteer leader.

COMMUNITY SERVICE:

_____ Community service projects, either individual, group, or club-type projects

JUDGING CRITERIA

1. List below an explanation of your leadership activities in 4-H _____

2. List other leadership activities not in 4-H _____

3. List activities you have been involved in through 4-H. _____

4. List most important awards and honors received in 4-H _____

5. What is the funniest/most unusual experience you've had in 4-H? _____

6. What have you learned in 4-H? _____

I have personally prepared this report and believe it to be correct:

 Applicant's signature

 Date

 Applicant's parent or guardian

 Date

A short statement by current club manager (or other 4-H leader if club manager is parent of applicant) describing involvement of applicant: _____

 Date

 Signature of Club Manager