



Date received in State 4-H Office ____/____/____ By: _____
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# Kansas 4-H Action Team Application

Name \_\_\_\_\_ County/District \_\_\_\_\_

Address \_\_\_\_\_

Street/Route/Box

City

State

Zip

\_\_\_ Adult     *Three year renewable term*

\_\_\_ Staff     *Three year renewable term*

\_\_\_ Teen     \_\_\_\_ (age as of 1/1/ current year) *One or two year renewable term*

      \_\_\_ One year teen term     \_\_\_\_ Two year teen term

Volunteer Screening Completed (required for appointment to team, with the exception of KSRE specialists and agents)

\_\_\_ Yes

\_\_\_ No

E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone (if it is acceptable to call) \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Text Messages Number (if acceptable) \_\_\_\_\_

Check the Action Team for which you are applying. Please complete a second application if you are applying for an additional Action Team:

\_\_\_ Ambassador

\_\_\_ Horse

\_\_\_ Dairy Cattle

\_\_\_ Photography

\_\_\_ Dog Care & Training

\_\_\_ SpaceTech

\_\_\_ Geology

*(Note: Shooting Sports utilizes a different selection process. Please refer to website for information to apply for the Kansas 4-H Shooting Sports Committee.)*

I am applying to:

\_\_\_\_ Join this Action Team for **first time**      \_\_\_\_ **Renew** my term on this Action Team

Please respond as fully as possible to the following items. Attach additional pages as necessary. (If renewing, please skip to question #7.)

1. Summarize your experiences serving 4-H Action Teams or examples of leadership you have provided in 4-H.

2. Summarize your experiences in program development and evaluation in 4-H or other related organizations (example - 4-H Program Development Committee, school board, civic groups).

3. Share an example of a creative or innovative contribution you have made in some aspect of 4-H or other educational setting.

4. Have you received any formal education or training in one or more of the following fields?

Check those that apply.

\_\_\_\_ Pre-school education

\_\_\_\_ Elementary education

\_\_\_\_ Secondary education

\_\_\_\_ Adult education

\_\_\_\_ Other

(please specify) \_\_\_\_\_

\_\_\_\_ No formal training

5. Why are you interested in serving on this 4-H Action Team?

6. Will you be a member of any other state Extension or 4-H committees or Action Teams during the coming year?

\_\_\_\_ Yes

\_\_\_\_ No

If Yes, what state Extension/ 4-H committee or Action Team?

*For those applying for a renewal term*

7. Why do you wish to rejoin the Action Team?

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Applicant Signature, Date

*NOTE: As the KSRE Extension Agent signing this application, I verify that the candidate has been volunteer screened in his/her local Extension Unit, and is a current appointed volunteer 4-H leader in his/her county/district.*

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Extension Agent Signature, Date

**Return to your local Extension Office to be submitted to the State 4-H Office.**

Kansas State 4-H Office, 201 Umberger Hall, 1612 Claflin Road, Manhattan, KS 66506;  
Phone: 785-532-5800 Fax: 785-532-5981