



Erie County 4-H Youth Development

Program Advisory Committee

Member Application

GENERAL				
NAME (Last)	First	Middle	Today's Date	
Mailing Address - Street			Daytime Phone # ()	Evening Phone # ()
City	State	Zip	Email address if any	Birthdate if under 18
Have you ever volunteered for CCE before? If yes, give dates, program, position <input type="checkbox"/> Yes <input type="checkbox"/> No				

Please send completed forms to the 4-H Office:

CCE Erie County

21 South Grove St.

East Aurora, NY 14052

Attn. 4-H Program Advisory Committee

Or

Email a scanned a copy to Sara Jablonski, sej57@cornell.edu, with the subject: **4-H Program Advisory Committee Application**

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Cornell Cooperative Extension Erie County

Describe your current and past involvement with 4-H Youth Development work and Cornell Cooperative Extension in Erie County. (Attach additional pages if needed to answer this or other questions)

Describe any involvement you have had with Cooperative Extension in this or other states. Please include key volunteer or paid staff with whom you worked.

What skills, knowledge, experience, etc. would you bring to the program committee? List any relevant volunteer, paid, or educational experiences that you have not previously noted.

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Describe any education or training that would enhance your contributions to the 4-H Youth Development Program Advisory Committee.

Describe any special skills, experiences, or interests along with hobbies, licenses, certifications, or other interests you consider relevant that you have not already noted.

What is your vision for 4-H in the next 5 to 10 years?

I affirm that the statements made on this application are true. I understand and agree that membership on the 4-H Youth Development Program Committee is without compensation or benefits of any kind.

Signature _____ **Date** _____

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