



NATIONAL 4-H CONFERENCE LEADERSHIP INTEREST FORM

To be considered for a Leadership Position, please follow the steps listed below.

STEP 1: Review the National 4-H Conference leadership position descriptions.

STEP 2: Applicants must complete **Part A** (saved as LastName-FirstName_InterestForm_Natl4-HConf) with resume (saved as LastName-FirstName_Resume_Natl4-HConf).

STEP 3: Email the completed form with resume to National4-Hconference@usda.gov using subject line "National 4-H Conference Leadership Interest", and in the cc line include the State 4-H Program Leader/contact for the Land-grant University you plan to represent.

STEP 4: If selected to serve in a leadership position, complete **Part B** and follow registration steps as directed by your Adult Advisors.

PART A – LEADERSHIP INFORMATION

APPLICANT INFORMATION (Required)

List the following information found on your photo identification.

1. FULL NAME (First, Last)	2. DATE OF BIRTH (Month, Day, Year)	
3. MAILING ADDRESS	4. Apt, Unit, etc.	
5. CITY	6. STATE	7. ZIP CODE
8. EMAIL ADDRESS	9. CELL PHONE NUMBER	

10. Which position(s) are you interested in? See position descriptions for eligibility and description of duties.

- | | |
|---|--|
| <input type="checkbox"/> Collegiate Facilitator | <input type="checkbox"/> Youth Leadership Team (YLT) |
| <input type="checkbox"/> Collegiate Facilitator Adult Advisor | <input type="checkbox"/> Youth Leadership Team (YLT) Adult Advisor |
| <input type="checkbox"/> Lead Collegiate Facilitator | |

DEMOGRAPHIC INFORMATION (Optional)

This information will inform our understanding of demographics among the participants of the National 4-H Conference Leadership Team.

11. AGE (on 1 st day of National 4-H Conference)	12. GRADE LEVEL
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13. What is your race and/or ethnicity? Select all that apply and enter additional details in the spaces below.

☐ American Indian or Alaska Native – Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.



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☐ Asian - Provide details below.

- ☐ Chinese ☐ Asian Indian ☐ Filipino
☐ Vietnamese ☐ Korean ☐ Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ Black or African American - Provide details below.

- ☐ African American ☐ Jamaican ☐ Haitian
☐ Nigerian ☐ Ethiopian ☐ Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

☐ Hispanic or Latino - Provide details below.

- ☐ Mexican ☐ Puerto Rican ☐ Salvadoran
☐ Cuban ☐ Dominican ☐ Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

☐ Middle Eastern or North African - Provide details below.

- ☐ Lebanese ☐ Iranian ☐ Egyptian
☐ Syrian ☐ Iraqi ☐ Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

☐ Native Hawaiian or Pacific Islander - Provide details below.

- ☐ Native Hawaiian ☐ Samoan ☐ Chamorro
☐ Tongan ☐ Fijian ☐ Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ White - Provide details below. Enter for example, French, Swedish, Norwegian, etc.

- ☐ English ☐ German ☐ Irish
☐ Italian ☐ Polish ☐ Scottish

Enter, for example, French, Swedish, Norwegian, etc.

14. SEX

☐ Female

☐ Male

4-H PROGRAM INFORMATION

15. How many years have you participated in 4-H?

☐ Less than 1 year

☐ 2 to 5 years

☐ 5 to 10 years

☐ More than 10 years

16. Which Land-grant University is your 4-H program associated with?



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17. What college or university do you attend? (Collegiate Facilitators only)	
18. Have you previously attended National 4-H Conference? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, select all the roles you have served at past National 4-H Conferences and list the year(s) you attended. <input type="checkbox"/> Adult Chaperone _____ <input type="checkbox"/> Youth Delegate _____ <input type="checkbox"/> Collegiate Facilitator _____ <input type="checkbox"/> Youth Leadership Team (YLT) _____ <input type="checkbox"/> Collegiate Facilitator Adult Advisor _____ <input type="checkbox"/> Youth Leadership Team (YLT) Adult Advisor _____ <input type="checkbox"/> Lead Collegiate Facilitator _____	
19. Have you served on other National 4-H teams? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which?	
REFERENCES <i>Please enter the name, phone, and email address for two references, who are not related to you.</i>	
20. REFERENCE FULL NAME (First, Last)	21. RELATIONSHIP
22. TELEPHONE NUMBER	23. EMAIL ADDRESS
24. REFERENCE FULL NAME (First, Last)	25. RELATIONSHIP
26. TELEPHONE NUMBER	27. EMAIL ADDRESS
QUESTIONNAIRE <i>Please write a clear and complete response to each question. These questions are an opportunity to introduce yourself and explain why you would like to serve as part of the leadership team for National 4-H Conference.</i>	
28. Why are you interested in this leadership role for National 4-H Conference? (100 words)	



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29. Tell us about one of your most meaningful experiences in providing leadership for a team and facilitating educational experiences for groups. (100 words)		
30. Tell us about a time when you were a part of a successful youth-adult partnership. What are some key takeaways from that partnership that you can utilize in your role with National 4-H Conference? (100 words)		
31. Tell us about an impactful experience working with people who had different backgrounds, experiences, personalities, and/or beliefs than you. What was challenging or exciting about that experience? What would you do differently now because of that experience? (100 words)		
32. Please send a PDF of your current resume outlining your education and experience relevant to the leadership role. Name the file as LastName-FirstName_Resume_Nat4-HConf		
PARTICIPANT AFFIRMATION		
<input type="checkbox"/> All the information included in this application about my personal information, background, experiences, and skills is accurate. I am either 18 years of age or older or I have discussed this with my parents/legal guardian, who by their signature below agree with my decision to serve in a leadership role for National 4-H Conference.		
<input type="checkbox"/> I consent to receive email, mail, texts, or phone call communications relating to announcements, assignments, logistics, mentoring, or similar matters regarding the National 4-H Conference.		
<input type="checkbox"/> I have read the National 4-H Conference Leadership Position Description document and agree to the travel expectations, leadership position description and duties.		
33. PARTICIPANT NAME (First, Last)	34. PARTICIPANT SIGNATURE	35. DATE
PARENT/GUARDIAN CONSENT		
<input type="checkbox"/> By checking the box to the left, I affirm that I am the parent/guardian of the above-named participant and consent to their participation in the National 4-H Conference leadership opportunity. I understand that providing consent is voluntary and not required. I understand that not providing consent may limit this young person's ability to serve in a leadership position at National 4-H Conference.		
36. PARENT/GUARDIAN NAME (First, Last)	37. PARENT/GUARDIAN SIGNATURE	38. DATE



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39. EMAIL	40. TELEPHONE NUMBER
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PART B – REGISTRATION INFORMATION
Complete Part B only if selected for a leadership position. Part B includes the additional information collected on the National 4-H Conference online registration system.

PARTICIPANT INFORMATION

41. REGISTRATION TYPE (Select one)
☐ Collegiate Facilitator
☐ Youth Leadership Team
☐ Collegiate Facilitator Adult Advisor
☐ Youth Leadership Team Adult Advisor

42. T-SHIRT SIZE
☐ Small ☐ Medium ☐ Large ☐ XL ☐ 2XL ☐ 3XL

LODGING INFORMATION (Required)
This information must be assigned by Land-grant College or University or Military Service Branch.

43. CHECK-IN DATE

44. CHECK-OUT DATE

45. NAME OF ROOMMATE

REASONABLE ACCOMMODATIONS

46. ACCOMMODATION REQUESTED (be as specific as possible, if accommodation is time sensitive, please explain)

47. REASON FOR REQUEST

DIETARY INFORMATION

48. DIETARY RESTRICTIONS (check all boxes that apply)
☐ None ☐ Dairy Free ☐ Vegan ☐ Nut Free
☐ Gluten Free ☐ Vegetarian ☐ Other _____

NAME BADGE INFORMATION

49. List your first name as you would like it to appear on your name badge.

☐ **ACTIVITY PREFERENCES**

50. List your top three choices for challenge question topics. (For Collegiate Facilitators Only)

1st choice 2nd choice 3rd choice

51. List your team's top three choices for community service. (For Lead Adult Advisor Only)



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1st choice	2nd choice	3rd choice
52. How many people (adults and youth) are in your group? (For Lead Adult Advisor Only)		
QUESTION FOR THE U.S. SECRETARY OF AGRICULTURE (Optional)		
53. If you had the chance to ask the U.S. Secretary of Agriculture a question, what would it be?		
PARTICIPANT AFFIRMATION		
<input type="checkbox"/> By checking the box to the left, I understand my behavior affects the entire National 4-H Conference community and that I represent myself, my local and state/territory 4-H Program and the 4-H Youth Development Program. Therefore, I have read, understand, and will abide by the National 4-H Conference Handbook and Code of Conduct.		
<input type="checkbox"/> By checking the box to the left, I consent to the reproduction, and use, royalty-free, of motion picture films, videotapes, recorded sounds, and still photographs of me by the Communications Staff, National Institute of Food and Agriculture, United States Department of Agriculture for all purposes including, but not limited to, education, training, trade, display, editorial, advertising, promotion, art, and exhibits. In giving this consent, I release the United States, its officers, employees, nominees, and designees from liability for any violation of any personal or proprietary right I may have in connection with such reproduction, and use.		
<input type="checkbox"/> By checking the box to the left, I understand that all publications, films, slides, videos, artistic or similar endeavors, resulting from my National 4-H Conference experience will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.		
<input type="checkbox"/> By checking the box to the left, I consent to receive email, mail, texts, or phone call communications relating to announcements, assignments, logistics, mentoring, or similar matters regarding the National 4-H Conference.		
<input type="checkbox"/> By checking the box to the left, I consent to participate in National 4-H Conference evaluation by a third-party evaluator. Evaluation may include participating in observations, evaluations, and feedback relating to a participation in National 4-H Conference activities (such as survey assessments or formal observations). I consent to share my demographic information (such as age, ethnicity, race, sex, Land-grant University, etc.) with the third party National 4-H Conference evaluator.		
<input type="checkbox"/> By checking the box to the left, I consent to be transported while participating in and traveling to and from this event by hired drivers authorized by the organizers of National 4-H Conference.		
54. PARTICIPANT NAME (First, Last)	55. PARTICIPANT SIGNATURE	56. DATE
PARENT/GUARDIAN CONSENT		
<input type="checkbox"/> By checking the box to the left, I affirm that I am the parent/guardian of the above-named participant and consent to their participation in National 4-H Conference. I have read, understand, and agree to follow the National 4-H Conference Handbook and provide consent for the participant affirmation(s) checked above. I understand that providing consent is voluntary and not required. I understand that not providing consent may limit this young person's ability to participate in National 4-H Conference.		
57. PARENT/GUARDIAN NAME		
58. EMAIL	59. TELEPHONE NUMBER	
60. PARENT/GUARDIAN SIGNATURE	61. DATE	



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