



Nominations made by: _____

Select Your Role: 4-H Youth Program Advisor/Assistant County 4-H Secretary
 State 4-H Leader Current State 4-H Ambassador

Please utilize this form to nominate two individuals you feel are ideal candidates for the State 4-H Ambassador Program. See the State 4-H Ambassador position description for specific requirements.

Nomination #1:

Name: _____

Address: _____

Email: _____

Phone: _____

Reasoning: _____

Nomination #2:

Name: _____

Address: _____

Email: _____

Phone: _____

Reasoning: _____

