

State 4-H Ambassador Program



Application Form (Due August 5, 2025)

Applicant Details (pl	ease print):					
Name:			Birthdate:			
Applicant's Phone Number	r:		Text messages allowed?	Yes	No	
Applicant's Email:						
Gender:	der: 4-H County: Year's in 4-H:					
Guardian Details (pl	ease print):					
Guardian's Name:						
Guardian's Phone Number	:		Text messages allowed?	Yes	No	
Guardian's Email:						
Committee Involvem Do you wish to serve on a	state 4-H Ambassador Committee:	Yes	No			
If yes, please select the de	esired committee (choose one):					
SkillsX by 4-H (S	ee SkillsX by 4-H committee position desc	criptio	n for more details)			
4-H Gala (see 4-h	H Gala committee position description for	more	details)			
Personal Narrative: Please answer the follow	ving questions in no more than three t	yped	pages.			
 4-H Experiences Summarize your in 	nvolvement in 4-H (local, county, state and	d natic	onal levels). Do not list ribbon	ıs or awar	ds.	

2. Leadership Experiences

- Summarize your leadership responsibilities and/or positions (in 4-H, school, your community and other activities).
- What has been your most fulfilling leadership experience and why?

What has been your most rewarding 4-H experience and why?

- 3. Personal Statement
 - What do you think you can contribute to the South Dakota State 4-H Ambassador Program?
 - Why do you want to be a South Dakota State 4-H Ambassador?

References:

Please include three letters of recommendation from each of the following:

Letters of recommendation can be included in the application package or sent directly to the following address: SDSU Extension c/o Julia Thaden Berg Agriculture Hall 128 Box 2207E, Brookings, SD 57007. Letters MUST be received by August 5, 2025.

- The 4-H Youth Program Advisor/Assistant or secretary from the applicant's 4-H county
- A 4-H Leader or Volunteer
- A 4-H member or alumni (not over the age of 21)

Interview Process: (Select preferred interview method)

Virtual (Zoom Platform) In-person (At State Fair)

Preferred Time during State Fair: (Circle or highlight at least three, all times in Central Time)

Wednesday (8/27/25)	Thursday (8/28/25)	Friday (8/29/25)	Saturday (8/30/25)	Sunday (8/31/25)
10:00-10:30 a.m.		10:00-10:30 a.m.		10:00-10:30 a.m.
10:40-11:10 a.m.		10:40-11:10 a.m.		10:40-11:10 a.m.
11:20-11:50 a.m.		11:20-11:50 a.m.		11:20-11:50 a.m.
12:00-12:30 p.m.		12:00-12:30 p.m.		12:00-12:30 p.m.
12:40-1:10 p.m.		12:40-1:10 p.m.		
1:20-1:50 p.m.		1:20-1:50 p.m.		
2:00-2:30 p.m.				
2:40-3:10 p.m.				
3:20-3:50 p.m.	3:20-3:50 p.m.		3:20-3:50 p.m.	
4:00-4:30 p.m.	4:00-4:30 p.m.		4:00-4:30 p.m.	
4:40-5:10 p.m.	4:40-5:10 p.m.		4:40-5:10 p.m.	
5:20-5:50 p.m.	5:20-5:50 p.m.		5:20-5:50 p.m.	
6:00-6:30 p.m.	6:00-6:30 p.m.		6:00-6:30 p.m.	
	6:40-7:10 p.m.		6:40-7:10 p.m.	

^{*}References may not be from family members of the applicant.

^{*}If virtual interview is selected, a link will be provided in later communications. A formalized invitation to interview will be emailed to each applicant shortly after the application deadline closes.

Applicant Name Printed	
Signature of Applicant	Date
Signature of Applicant Parent/Guardian	Date

I have prepared this application personally. To the best of my knowledge, this information is truthful and accurate. If selected, I am willing to accept the responsibilities and duties of a South Dakota State 4-H Ambassador according to

Applications must be received by: August 5, 2025

Mail application material to:

SDSU Extension State 4-H Office
Attn: Julia Thaden
Berg Agriculture Hall 110, Box 2207E
Brookings, SD 57007

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the position description.