Name of Nominee: ____________________________________________

Role, Office, Appointment, Positions Held:

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Attach no more than one page describing why the person is being nominated. Highlight the significance of individual’s historic and continuing support to 4-H.

Nominator’s Name and Contact Information: ________________________

Nomination Form must be received in the State 4-H Office no later than Friday, May 15, 2020.