Print Form

MONTANA STATE UNIVERSITY EXTENSION

Flathead County Ambassador Application

Name: _____ DOB: _____

Address: _____

Phone: _____ Email: _____

High School: _____

Grade: _____ GPA: _____

Parent or Guardian's Name(s): _____

Flathead County Extension Office

Major 4-H Projects and Activities: (only include those which you feel competent in conducting workshops and giving instructions to others. Include the specific skill you could teach in each project or activity.)

Major 4-H and Other Accomplishments: (Examples- offices held, awards, etc.)

Montana State University, U.S. Department of Agriculture and Montana Counties Cooperating. MSU Extension is an equal opportunity/ affirmative action provider of educational outreach.

800 South Main St.
Kalispell, MT 59901-5400
www.msuextension.org

Tel (406) 758-5553
Fax (406) 758-5881
Email flathead@montana.edu

Mountains & Minds

Leadership Abilities: (Examples- record keeping, demonstrations, modeling, camp counselor, assisting in workshops, talent, etc.)

Why do you want to be a 4-H Ambassador?

Member's Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

Applications are due to the Extension Office no later than Friday, April 17th, 2009.

Montana State University Extension Service is an ADA/EO/AA/Veteran's Preference Employer and educational outreach provider.