Calumet County 4-H Exchange Application 2018-2019

Today's Date:			
Name:	Grade: Age	: Birth Date:	
Address:	City		Zip
Email Address: (print clearly)		Youth Cell#:	
Parent/Guardian:		Home Phone #:	
Parent E-mail:		Parent Cell#:	,
Name of School attending			
Days absent in 2016-17 (Your school r	may be contacted to ver	ify your information	n.)
4-H Club:	Years	in 4-H: (including t	this year)
Name of main leader of your club:(Your main leader may be contacted to verify your	M information, so be sure	ain leader phone #: it is accurate.)	
Number of meetings held by my club last year: (Au	ıg. 2016 to Aug. 2017)	Number I	attended:
If your attendance at club meetings is low, please ex	xplain why:		
Did you complete and turn in a 4-H record book las	st year (2016)?		
Are you planning on turning in a record book in Oc	ctober of 2017?		
Club Offices and Committees held (list number of t	times):		
List 4-H projects taken throughout your years in 4-1	 Н·		
Elst 4 11 projects taken unoughout your years in 4 h			
I participated in the Calumet County Fair last year ((2016) by exhibiting in	the following project	et areas:
I plan on participating in the Calumet County Fair t	this year (2017) by exhi	biting in the followi	ng project areas:
Leadership Experiences: (Teen Leaders, Leadership	p Conference in Madiso	on, fair helper, etc.)	
Other 4-H activities you've participated in (worksh	ops, clinics, camp, etc.)):	

List any community service projects or volunteer efforts that you assisted with in the past two years (4-H or other):
Hobbies and interests:
List other information about yourself not previously mentioned:
What previous exchanges have you participated in? (List the name(s) of the state(s) and whether you traveled of hosted.)
List any other trip you've taken in which you have been away from home without your family.
How do you think you will benefit from this exchange?
For the 2018-2019 exchange rotation will be with one state. We will be hosting that state in the summer of 2018 and traveling to that state in the summer of 2019.
For parents: I give consent for my child to participate in the Calumet County 4-H Exchange program. I have read and agree to enforce the guidelines if my child is selected.
For member: I am interested in participating in the Calumet County 4-H Exchange program. I have read and agree to abide by the guidelines if selected.
(Mother's signature) (Father's signature) (Member's signature)

Please send this completed form to Kay Biese, N4054 Long Rd., Chilton, WI 53014 delivered or postmarked no later than **September 15, 2017**. Interviews will be held in October.