

**LORENA ELLICOTT MEMORIAL
OUTSTANDING SENIOR 4-H MEMBER AWARD
AWARD APPLICATION FORM – FALL 2025**

MEMBER'S NAME _____ AGE _____

YEARS IN NIOBRARA COUNTY 4-H _____

CLUB NAME _____

**1) LIST PROJECT'S THE MEMBER HAS TAKEN DURING THEIR 4-H CAREER
AND THE NUMBER OF YEARS IN EACH PROJECT.**

**2) WHAT LOCAL CLUB ACTIVITIES HAS THE MEMBER BEEN INVOLVED WITH
DURING THEIR 4-H CAREER?**

**3) DESCRIBE OR LIST THE COUNTY, DISTRICT, STATE AND/OR NATIONAL
PROGRAMS THE MEMBER HAS PARTICIPATED IN OR BEEN INVOLVED.**

4) DESCRIBE THE MEMBER'S LEADERSHIP ACTIVITIES, ROLES, AND/OR SKILLS THEY HAVE DEVELOPED.

5) WHAT TYPE OF COMMUNITY SERVICE PROJECTS HAS THIS MEMBER BEEN INVOLVED WITH THROUGH 4-H.

6) LIST AND ELABORATE ON THREE WORDS THAT WOULD BEST DESCRIBE THIS INDIVIDUAL.

7) PROVIDE ANY ADDITIONAL COMMENTS YOU BELIEVE SHOULD BE KNOWN ABOUT THIS INDIVIDUAL WHICH MAY PROVIDE MORE INSIGHT INTO THIS MEMBER'S 4-H INVOLVEMENT, KNOWLEDGE AND/OR SKILLS GAINED, ETC.