Lorain County 4-H Advisory Board Youth Representative
Position Description & Application

Overview:
This position is open to all youth enrolled in the Lorain County 4-H program who are 14-18 years old as of January 1st of the current year. This is an appointed position that is voted upon by the Advisory Board at large. The term will begin February of 2025 and end in December of 2025.
All completed applications are due to the Advisory Board before January 30, 2025 either in paper form mailed to the extension office or emailed to lc4hadvisoryboard@gmail.com

Position Title:
Youth Representative to the Lorain County 4-H Advisory Board

General Purpose:
To bring a unique perspective to the board that is representative of the youth we strive to serve.

Time Required:
The Advisory Board meets on the third Wednesday of each month. Youth Representatives will be held to the same attendance standard as all board members set forth in the constitution: “Members must attend 75% of regularly scheduled meetings and must be in attendance for 50% of the business meeting” (Article IV, section C, subsection 1)
As a Youth Representative you will also be a part of sub-committee meetings that will require an additional investment of your time.

Specific Responsibilities:
- Serve on a sub committee
- Vote to elect a youth representative to the executive board
- Participate in the open house event.
- Maintain confidentiality of board business

Skills needed:
- Communication
- Organization
- Leadership
- Teamwork

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Applicant Name (First) (Middle initial) (Last)

Present Mailing Address: Street City State Zip

Youth email address Youth phone number

Parent/Guardian names Parent/Guardian phone number

Date of birth & age as of 1/1/2025: _____

Current school & grade level: _____

Name of 4-H Club: _____

Share a little more about yourself:

Why would you like to be a Youth Representative?

What are you hoping to learn during your time on the Advisory Board?

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What experiences do you have that would benefit you in this role on the Advisory Board?

Please submit a letter of recommendation from an approved Lorain county 4-H volunteer whom you are not related to with this application.

By signing this form you and your responsible parent/guardian understand the position roles & responsibilities and will adhere to all guidelines set forth by the board.

_____	_____	_____	_____
Youth signature	Date	Parent/Guardian signature	Date