



Delaware 4-H State Teen Council Officer



COMMITMENT FORM

AS AN ELECTED STATE 4-H OFFICER, DURING MY YEAR OF SERVICE, I PLEDGE I WILL:

- ❖ Be self-motivated, organized and responsible for my personal actions and commitments.
- ❖ Accept challenges with enthusiasm, perform to a degree higher than is expected, put my responsibilities into action without being told, keep a positive attitude in all that I do.
- ❖ Accept all of the responsibilities in being a contributing and participating member of a committee.
- ❖ Officially represent 4-H to legislators, University of Delaware officials and other decision makers.
- ❖ Function as a team member to plan and carry out leadership and community service projects, which involve 4-H membership at the club and county levels.
- ❖ Initiate *self-determined and self-directed* leadership and citizenship experiences at the county and state levels during term in office.
- ❖ Promote the value of 4-H through opportunities officers initiate, as well as upon the request of county and state staff.
- ❖ Be willing to commit the entire year to the Delaware 4-H program with the knowledge that officers' time and responsibilities will be divided between 4-H activities at the county and state level.
- ❖ Honor and respect the Delaware 4-H organization and to conduct myself in such a manner as will reflect positively on the program and the office held.
 - Know that the use of any type of tobacco products, alcohol, and non-prescribed drugs is illegal and prohibited at all 4-H events or activities.
 - Be mindful of what is posted on Social Media sites and make sure you are representing yourself and Delaware 4-H in a positive way.
- ❖ Serve as an advocate for the 4-H program on the local, county and state level.
- ❖ Represent the concerns, interests, and ideas of 4-H members and make decisions based on the welfare of the 4-H program and the constituents rather than one's personal interests.
- ❖ Show respect and appreciation for 4-H members, volunteers, parents, DCES educators and DCES specialists, and prove to be worthy of their support and trust.
- ❖ Be willing to travel without creating conflict at home, work or school.
- ❖ Conduct self in a manner that inspires respect through service and consideration for others.
- ❖ Use wholesome and appropriate language and behavior in all formal and informal conversations.
- ❖ At all times maintain proper dress and appearance to project a professional and desirable image of 4-H.
- ❖ Become knowledgeable of and be able to share facts about the Delaware 4-H Program and the Delaware Cooperative Extension Service.
- ❖ Further develop skills as an effective public speaker and workshop presenter through continuing education, preparation and practice.
- ❖ In a timely manner, write and respond to all electronic mail, letters, thank-you notes, reports and other correspondence that are necessary and desirable.
- ❖ Have a positive and enthusiastic attitude; regularly reevaluate attitude and make every effort for improvement; accept and search out constructive criticism and evaluation of total performance.
- ❖ Willingly take and follow instructions as directed by those responsible for State 4-H Officers.
- ❖ Maintain and protect personal health through adequate rest and good nutrition.
- ❖ Work in harmony with fellow 4-H officers and not knowingly engage in conversations detrimental to Delaware 4-H or other 4-H members, officers or adults.

I, _____, agree to accept the responsibilities and live up to the expectations of a State 4-H Officer. I am willing to abide by the points presented in the Commitment Form. I do understand that the listing is not "all inclusive." I further understand that if I do not fulfill my obligations or conduct myself in a manner appropriate to the position I have been elected, I will face the consequences of my actions and be removed from office.

Officer's Signature _____ *Date* _____



Delaware 4-H State Teen Council Officer



Officer's Parent/Guardian's Signature _____ Date _____

Please return this form to Jill Jackson no later than Friday, June 28, 2019. Call Jill at (302) 856-7303 with questions.

The Goal of a Delaware 4-H Officer:

“To foster the development of youth and the 4-H program.”

As a role model for youth and a representative and spokesperson for the 4-H program, your job is to uphold the high ideals, values and moral standards of the Delaware 4-H program.

Complete the following information: (Please type or print clearly)

Full Name of Applicant _____

Mailing Address _____

City _____ State _____ Zip Code _____

Area code and phone number _____ E-mail address _____

County _____ 4-H Club _____

Please rank the offices for which you would like to be considered (only indicate those offices for which you would consider being slated):

___ **President** ___ **Vice President** ___ **Secretary** ___ **Social Media Marketing**

___ **County Representative**



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Candidate Selection Process

The following criteria are required for all interested State Officer Candidates:

Age

All interested candidates must be at least 14 years of age on or before January 1, 2019.

4-H Involvement

All interested candidates must have or have had at least one of the following leadership positions in order to be considered:

- Elected or appointed officer on County 4-H Junior Council
- Voice or Echo at State 4-H Camp
- Delegate to 4-H National Congress
- Delegate to 4-H National Conference
- Delegate to any other National 4-H event or program

Application Form

Complete this form and return on or before the designated due date to Jill Jackson. Submitting an application does not automatically qualify someone as a candidate for State Office. To receive further consideration the individual must complete all parts of the process in a timely manner.

Three (3) Recommendation Forms – Due by Friday, June 28, 2019

The forms are to be confidential and sealed in an envelope addressed to “Jill Jackson.” The forms are enclosed at the end of this application. There is one form for the 4-H Educator and one form for all other individuals.

- Two recommendation forms may be from a school representative, youth advisor, or an individual who has observed and experienced your skills as a leader.
- One of the recommendation forms must come from your County 4-H Educator.
- Please note that you do **NOT** need to turn in official recommendation letters with your application.

Interview Session

The purpose of the interview is to make sure the candidate is making an informed decision regarding candidacy and the office sought. This session is mandatory for all candidates and may also be done over teleconference, if necessary. Interviews will be held in early July 2019, prior to the Delaware State Fair.

Selection of Candidate

The candidate will be selected by a committee of 4-H professional staff and/or other designated individuals from the county and state level. Candidates will be notified of their selection by July 27, 2019.

Term of Office

The candidates selected for the 2019-2020 cycle will serve in office from Saturday, July 27, 2019 through Saturday, July 26, 2020. Officers will be announced at the 4-H Awards Ceremony during the Delaware State Fair on Saturday, July 27, 2019.



Delaware 4-H State Teen Council Officer



I, _____, understand that the candidates for State Office will be selected through the process outlined on the Candidate Selection Process form. I acknowledge that the criteria are in place to ensure ideal candidates are selected for the various officer positions on the Delaware 4-H State Teen Council. I also understand that if I do not complete the steps listed above by their designated date, I will not receive consideration as an officer candidate.

I, _____, agree to accept the responsibilities and live up to the expectations of a State 4-H Officer. I am willing to abide by the points presented in the Commitment Form. I do understand that the listing is not “all inclusive.” I further understand that if I do not fulfill my obligations or conduct myself in a manner appropriate to the position I have been elected, I will face the consequences of my actions and be removed from office.

Candidate's Signature _____ *Date* _____

I have read the Commitment Form and understand what will be expected of my child if elected. I will support the Delaware 4-H program and my child in fulfilling these duties and responsibilities.

Candidate's Parent/Guardian's Signature _____ *Date* _____

I will continue to support, guide, and provide education to this young person in their personal and professional development as a 4-H member.

County 4-H Extension Educator's Signature _____ *Date* _____



Delaware 4-H State Teen Council Officer



Non-4-H Recommendation Form

(do not include with application materials, these should be submitted/mailed directly)

Please send this form directly to Jill Jackson, 16483 County Seat Highway, Georgetown, DE 19947; email jackson@udel.edu ; fax 302-856-1845; phone 302-856-7303.

| | |
|---|----------------------|
| Name of Candidate: | County of Candidate: |
| Name of Reference: | Email of Reference: |
| Thank you for assisting with this effort. We very much appreciate your help in learning more about the suitability and abilities of this officer candidate. Your comments will be confidential and will not specifically be shared with the 4-H member. It is your decision as to whether or not you give a copy of these remarks to the candidate. | |

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| Please rank the nominee based on your knowledge of their abilities in the following areas. (Scale: 1=skill not apparent/poor, 2=very little experience/below average, 3=some experience or potential/average, 4=very experienced/above average, 5=master/exceptional, N/K=no knowledge/have had little interaction) | |
| Leadership Skills | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Organizational Skills | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Self Motivation | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Follow Through | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Team Work | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Maturity | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Cooperativeness | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Sensitivity toward Others | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Energy & Enthusiasm | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Confidence | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Ability to Handle Emergencies/Stress | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Self Discipline | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Peer Support | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Family Support | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Accepting Advice & Guidance | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Reliability | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> N/K |
| Are you aware of any reasons this nominee should not be considered for a State 4-H Officer candidate and its associated responsibilities? | |
| Please submit this form to the address/email above. Thank you! | |



Delaware 4-H State Teen Council Officer



4-H Educator Recommendation Form

(Do not include with application materials, these should be submitted/mailed directly)

Please send this form directly to Jill Jackson, 16483 County Seat Highway, Georgetown, DE 19947; email jackson@udel.edu ; fax 302-856-1845; phone 302-856-7303.

| | |
|---|----------------------|
| Name of Candidate: | County of Candidate: |
| Name of Reference: | Email of Reference: |
| Thank you for assisting with this effort. We very much appreciate your help in learning more about the suitability and abilities of this officer candidate. Your comments will be confidential and will not specifically be shared with the 4-H member. It is your decision as to whether or not you give a copy of these remarks to the candidate. | |

Please rank the nominee based on your knowledge of their abilities in the following areas. (Scale: 1=skill not apparent/poor, 2=very little experience/below average, 3=some experience or potential/average, 4=very experienced/above average, 5=master/exceptional, N/K=no knowledge/have had little interaction)

| | | | | | | |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|------------------------------|
| Leadership Skills | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Organizational Skills | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Self Motivation | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Follow Through | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Team Work | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Maturity | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Cooperativeness | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Sensitivity toward Others | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Energy & Enthusiasm | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Confidence | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Ability to Handle Emergencies/Stress | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Self Discipline | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Peer Support | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Family Support | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Accepting Advice & Guidance | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Reliability | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> N/K |
| Is this nominee a 4-H member in good standing in your county 4-H program (circle one)? | YES | | NO | | RESERVATIONS | |

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| Are you aware of any reasons this nominee should not be considered for a State 4-H Officer candidate and its associated responsibilities? |
| Please submit this form to the address/email above. Thank you! |