



APPENDIX E

Macomb County Member Individual Community Service Award Cover Sheet

Member's Name: _____ 4-H Age: ____

Type of Community Service: _____ # of Hours: _____

Club Name: _____

To be completed by nominee:

- 1) List all the 4-H service activities in which you have participated.
- 2) In a paragraph, briefly describe how your activities have promoted the 4-H program.
- 3) List all the non-4-H (community/school) service activities in which you have participated.
- 4) In a paragraph, describe your most significant (4-H or non 4-H) community service project, what role you played in it and how it affected you and the community.

