Name:		4-H Age:	(15-19 as of January 1st	of current year)
Birth Date:	Parents Name:			
Street:		City .		Zip:
Phone:	Fax: _		Cell:	
Names of Club(s):				
Email Address:			Years in 4-H:	
		•	ty.	nd validation of
the application	•	it and icader maie	ating their support an	id vandation of
* *	ed or neatly printed	in ink with corr	ect spelling and gran	nmar. VERY
Important!				
-	ist be at least fifteen y	•	ry 1 <sup>st</sup> of current year.	
	n only be received on	•	44 4040 NO TWO	
	for receiving applica			
	Diane Keinath, 5351	Frank Rd, Fran	<u> </u>	Email
diane.keinath	<u>leatt.net</u>			
A. List all project area	as you have participated	in and how many	years in each.	
<u>Project</u>	<u>Year</u>	<u>Project</u>		<u>Years</u>

Office	Date	Event	Date	
		-	<u> </u>	
SU is an affirmative-action, equal-o without regard to race, color, nation prientation, marital status, family st	al origin, gender, gender ident			
Page 2 – Saginaw County Ou	ıtstanding Teen			
D. List special 4-H awards you have received.		E. What other community activities outsid		
A contract	ъ.	4-H have you bee		
Activity	Date	Award	Date	
F. Write a brief statement a		g how 4-H has helped you t ommunity. Attach additio		
members and now 4-11 ii	as neipeu you in your c	ommunity. Attach additio	nai sneets ii necessai y.	

G. Please attach 3 professional references to your application.					
as a parent, do you support this mem	ber's application for an award	? □ Yes □ No			
What has your child done to make you feel they are deserving of being selected Outstanding Teen for Saginaw County?					
Parent's Signature:		Date:			
Member's Signature:		Date:			
1 2 6		Date:			
Leader Comments:					

MSU is an affirmative-action, equal-opportunity employer. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran status.