

2025 Polk County Key Award and Educational Experience Selection Process Information and Application

Bring or submit this form, a completed ME (Member Evaluation) form, and a 4-H Leader Evaluation and Recommendation form completed by your club leader (make sure to reach out to them ahead of time) by **4:30 PM, Friday, January 3, 2025** to:

Lindsay Spindler, UW Extension Office
100 Polk Plaza, Suite G600
Balsam Lake, WI 54810

Selection will be made by Polk County 4-H Awards, Recognition and Record Book Committee following interviews that will be held with both virtually through Zoom and in person options. Dates to be determined.

Wisconsin 4-H Key Award

Five Polk County 4-H members can receive the Wisconsin 4-H Key Award at the Polk County Awards Program in the fall of 2025.

Members must:

- Be at least 15 years of age on January 1, 2025
- Have completed three years of 4-H prior to Fall 2024
- Have registered and completed one year of leadership work prior to Fall 2024

Educational Experience Trips Financial Awards

Applicants who wish to attend 4-H trips throughout the 2025 year are eligible for financial awards from the Polk County 4-H Leader Federation, Inc. Monetary awards are dependent upon the type of trip and more information can be found on the Financial Reimbursement Policy Guidelines.

Name: _____ Birth Date: _____ Youth Phone #: _____
Youth Email: _____
Grade in School _____ Number of years in _____ Number of years in youth
fall of 2024 _____ 4-H counting current year _____ leadership prior to 2024 _____

I am applying for:

- Citizen Washington Focus National 4-H Conference Other: _____
 National 4-H Congress American Spirit
 Wisconsin 4-H Key Award Advanced Space Camp

Application process for all National Trips and the Key Award require this signed form, a completed M.E. (Member Evaluation Form) and a 4-H Leader Recommendation Form. Submit all completed forms by Friday, January 5, 2025 to the Extension Office. Applicants will be interviewed for award opportunities.

National 4-H Trip Agreement Statement

If selected, I agree to conduct myself in an appropriate manner, cooperate with everyone in the delegation and endeavor to learn as much as possible. I realize I will be financially responsible for the entire cost of the trip if I cancel after the deadline and a replacement cannot be found.

Applicant's Signature: _____

_____ (name of son/daughter) has my permission to apply to be a recipient of the above chosen award delegate under the above conditions. If selected, I will have him/her attend the orientation meeting and meet the agreed upon obligations.

Parent(s) Signature(s): _____