

*jr.*  
**LEADERSHIP**  
 Florence County 4-H Program



*Application Due Date: March 15, 2020*

Personal Information		
Name:		
Address:		
City:	Zip:	
Mobile Phone:	E-mail Address:	
Date of Birth:	Age:	Sex (Male/Female):
School Attending:	Grade:	
Name of Parent(s)/Guardian with whom you reside :		
Parent/Guardian's Mobile Phone:	Parent/Guardian's E-mail Address:	

*(A correct & working e-mail address is IMPORTANT: Most communication takes place electronically.)*



**Organizations and Activities**

*Please list up to FIVE (5) school, volunteer, religious, social, ethnic, athletic, etc. organizations or activities with which you have participated during high school, in order of importance to you:*

Organization/Activity:	Year(s):	Position(s) Held:
1.		
2.		
3.		
4.		
5.		

## Short Answer Questions

**Question 1: What is your definition of the word: LEADER?**

**Question 2: What career do you plan to pursue? What appeals to you about this profession?**

**Question 3: In your opinion, what is good citizenship?**

**Question 4: Why do you want to participate in Junior Leadership Florence County and what do you hope to gain from the experience?**

### Student and Parent Commitment

By submitting this application to the program, the applicant is indicating that he/she and their parent(s)/guardian(s) have read the rules and requirements and agree to adhere to them. We understand that the student will be required to make up any work that is missed according to school policies. We also understand that the student and a parent must attend the orientation and that each student is required to attend the opening retreat and at least six of the eight sessions in order to graduate from the program. Failure to meet the attendance policy will result in not graduating from the program and the commitment fee will not be refunded. We also understand that Junior Leadership Florence County is not responsible for transportation of students to and from the meeting sites. The program will only be responsible for transportation during each session.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent/ Guardian Signature*

\_\_\_\_\_  
*Date*



## School Approval & Endorsement Form

*Please have your principal sign below.*

I approve of and recommend the participation of \_\_\_\_\_  
in the Junior Leadership Florence County Program for the 2020-21 school year. I understand that some of the sessions will take place during school hours and the sessions will be excused absences. However, the student will be required to make up class work that is missed according to the policies set forth by our school district.

By signing below, I also certify that the applicant is in good academic standing with our school and is capable and eligible to participate in this prestigious program.

Comments from Guidance Counselor or Principal:

Signature of Principal \_\_\_\_\_

Date \_\_\_\_\_

*Please print:*

Name of Principal \_\_\_\_\_

Phone \_\_\_\_\_

Name of School \_\_\_\_\_