

Brooke County 4-H Camping Tribal Leadership Application – 2018

Applicant Information

Name: _____

Address: _____

City, State, Zip: _____ Phone: _____

Birth Date/Age: _____ Current Grade: _____

4-H Years: _____ County Camp Years: _____

Tribe: _____ State Camp Years: _____

Please circle the camp(s) that you wish to be considered:

Brooke County 4-H Camp (June 26-30)
Cloverbud Day Camp (August 6-10)

General Information – for County or Cloverbud Camp

Prior Leadership Experiences (4-H, School, and/or Community) that you would bring to the position of Chief or Sagamore:

As a Chief or Sag, how would you make sure that all members of your Tribe felt included in tribal activities?

Why do you want to be a Chief or Sagamore at County Camp?

What days will you be available to assist at Cloverbud Camp?

Please check off all that you can serve:

Monday Tuesday Wednesday Thursday Friday

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