**MARATHON COUNTY 4-H ADULT AWARDS NOMINATION FORM**

Please Check: (Awards are described on the back of this form)

 \_\_\_\_\_ Friend of 4-H

 \_\_\_\_\_ C.J. McAleavy

 \_\_\_\_\_ Clover Power Plus

Nominee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation/Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4-H Club (for C.J. McAleavy or Clover Power Plus only): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominated by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Briefly describe the contribution this person has made:

2. What impact have these contributions made on your club, multi-club, or county level:

(Additional comments may be added on the back of this form)

**Friend of 4-H**

An individual or business that has supported the 4-H program on a multi-club or county basis

**C.J. McAleavy**

A 4-H leader who has contributed a great deal to the local club and county program over a considerable period of time

**Clover Power Plus**

Current 4-H volunteer who is doing an outstanding job of working with young people on a multi-club or county basis

Complete this form and return to the Extension Office by August 31.

Extension Marathon County Office – Awards Committee,

212 River Drive, Suite 3, Wausau, WI 54403-5476