# 2018 National Grange Youth Officers Team Application

## Find the online application at: <a href="https://form.jotform.us/71934339689170">https://form.jotform.us/71934339689170</a>

Name		Gei	Gender	
Address	City	State_	Zip	
E-Mail	Phone			
Age as of Jan. 1				
		Grange No	, State	
Please list the offices y	ou are interested in filling in or	der of preference:		
1st	2nd	3rd		
Which Achievement av	wards (3 or more) have you ear	ned? Must be earned betwe	een Aug. 31, 2017 and	
Sept. 1, 2018. (One mu	ust be John Thompson and Grar	nge Trivia does not count.)		
1	2	3		
What facts would prev	rent you from coming to the Na	tional convention other tha	n illness or death?	
	obtained permission from teacl		_	
How are you going to p	pay for the trip?			

#### **Biographical Information**

Give 5 to 8 lines description about yourself and/or family to be used for display purposes throughout the National Session. Enclose three 4" x 6" color prints including one picture of the family. The pictures will be mounted on a poster board and displayed along with the bio at various functions throughout the Annual Session.

### **Grange Experience (Please provide information on separate sheet)**

List leadership roles you have fulfilled in Grange indicating service on committees, boards or as officers.

SUBORDINATE/ COMMUNITY GRANGE YEARS

STATE/NATIONAL GRANGE YEARS

### Leadership Experience

A. Community and Service Programs participated in by you and your spouse and leadership given.

ORGANIZATION LEADERSHIP ROLE	ins, church, school, volunteer leadership, e	τε.)
B. List significant offices held or awards achieved ORGANIZATION LEADERSHIP ROLE	d while participating in youth organizations	<b>5.</b>
C. What additional award(s) and recognition have	ve you received in the past?	
D. What are your leadership goals for the next f	ive years?	
E. What have you done to promote membership to join Grange, how many actually joined.	o in the Grange? How many people have yo	ou encouraged
Your Signature		
Parent's Signature (if under 18)		
Subordinate Certification This will certify that the above named person is eligible to participate in this program, and that t		_
Master's Signature:	Date:	_
State Certification		
Youth Director's Signature:	Date:	
State Master's Signature	Date	
Three letters of recommendation are to be sent a. Subordinate Grange, preferably Master or Sec b. State Master	• •	
c. State Youth Director(if applicable) This application must be postmarked on or befo	are Sentember 1. Send this application alon	g with your
letter of recommendation to the National Grang		5 your