

4-H LEADER'S EVALUATION OF CANDIDATE

I submit the following evaluation of _____
Name of Applicant

who is enrolled in _____ in the _____ 4-H Club.
Name of Project Area Name of Club

ATTENDANCE & PARTICIPATION IN PROJECT	EXCELLENT	GOOD	FAIR	POOR
Project Meetings				
Field Days & Tours				
County or Regional Events				
Other				
LEADERSHIP				
Help Given to Project Members & Leaders				
Knowledge/Skills Passed on to Others				
Demonstrations Presented				
Committee Chairmanships/Memberships				
News Stories Written, Talks Given, Etc.				
County Level Planning & Participation				
SKILLS & KNOWLEDGE				
Project Growth & Scope				
Skills Improved or Learned				
PERSONAL DEVELOPMENT				
Enthusiasm & Attitude				
Responsibility Accepted & Carried Out				
Decision Making Ability				
Establishment of & Work Toward Goals				
Accomplishments Exceed Minimum Required				

 Signature of Project Leader

 Project Leader's Club

 Date

The project leader signing this evaluation is certifying this person is a member of his project and has met all necessary requirements. If the project leader for the member's project is unable to sign, an explanation should be attached by the project leader or local club leader as to the reasons a different signature appears.

PLEASE WRITE ADDITIONAL COMMENTS ON THE BACK OF THIS SHEET. THIS EVALUATION WILL BE KEPT IN STRICT CONFIDENCE AND WILL NOT BE RETURNED TO THE CANDIDATE.

UCCE 4-H YDP
 80 Stone Pine Rd., #100
 Half Moon Bay, CA 94019
 Due: Tuesday, September 15, 2015

