

V. Additional comments:

VI. Letter of recommendation from Nominator is requested, but not required, as a statement of why nominee is worthy of receiving this award.

VII. For **Outstanding Master 4-H Club Member Award Nominees only:**

A. Master 4-H Club Membership was earned:

Year _____ County _____ Project _____

B. Describe Contributions to the Master 4-H Club:

VIII. Nominated by Master 4-H Member or County Extension Director or Agent:

Name of Nominator _____

Address _____

Phone _____ County _____

Signature of Nominator _____ Date _____

Application Deadline: May 15

Mail completed form to:

**Dr. Julia Lucas
193 South Twelfth Street
Cochran, GA 31014**