**EMERALD STAR APPLICATION**

(Application should be typed or neatly printed in pen)

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age on Dec. 31 \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_

4-H Club \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years in 4-H \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of your Emerald Star Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address of your Emerald Star Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Directions: Complete the following application and Leadership Development Report Part 2 (Pre), and send them via email to emeraldstar@contracosta4h.org. The Emerald Star Committee will conduct interviews with all applicants (January 31, 2017 – tentative date).

1. Describe your proposed project or event:
2. Why did you select this project or event, how will this benefit members of Contra Costa County 4-H, and what do you hope to accomplish?
3. How do you plan to carry out your project or event? (Present a timeline, describe supplies needed, facilities, etc.)
4. Estimated Costs and Plans for Financing (prepare and attach a budget for your project): Note: The member and family members are not permitted to finance the project. The project member must learn to raise funds for the project if finances are needed to complete the project.
5. Describe other resources you may need.

**Applicant:**

I have reviewed and completed this form, and I understand the commitment necessary to complete the Emerald Star Project. I also understand that to be awarded this star, I must complete the project fully, including all requirements listed in this document.

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 Emerald Star Candidate Signature Date

**Parent:**

I understand that my son/daughter is accepting the challenge of the Emerald Star Project, and he/she will need my encouragement and support. I understand that this project, along with the goals and strategies, should be completed primarily by the member. I understand that a star will only be awarded upon the completion of my son/daughter’s project. I also understand the Emerald Star Project Committee and Project Advisor will give my son/daughter support and guidance to help the member achieve individual goals.

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 Emerald Star Candidate Parent’s Signature Date

**Community Leader:**

I believe this applicant is ready to accept the challenge of the Emerald Star Project. I have listened to his/her proposal for a project and believe it is suitable for this 4-H member and that it should benefit the 4-H community. I understand that a star will only be awarded upon the completion of the member’s project.

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 Community Leader’s Signature Date

**EMERALD STAR COMMITTEE’S COMMENTS:**

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 Emerald Star Advisor’s Approval of Plan Date

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 Emerald Star Committee’s Approval of Plan Date

**UPON COMPLETION OF THE EMERALD STAR PROJECT:**

1. Complete the Part 2 (Post) section of the Leadership Development Report
2. Turn in the following budget analysis:

Attach a spreadsheet with your initial budget and the actual revenue and expenses. Were any of the actual numbers significantly different from your projections? Why? How might this exercise help you to plan better budgets in the future? How did your fundraising go, if you needed to raise funds? What might you do differently if you need to raise funds for a similar project in the future?

1. The member’s binder, LDR, and budget analysis must be turned into the Leadership Committee by May 31 of the final year of the member’s project. The end-of-project interview must be completed by June 30 of the same year. Emerald Stars will be awarded at the following County Achievement Night.