



## CWF & LWF Program Assistant Application Documents

**THANK YOU FOR CONSIDERING THE CITIZENSHIP WASHINGTON FOCUS AND LEADERSHIP WASHINGTON FOCUS PROGRAM ASSISTANT POSITION. IN ORDER FOR YOUR APPLICATION TO BE CONSIDERED COMPLETE, YOU MUST SUBMIT TWO PARTS BY JANUARY 15:**

### **PART 1:**

Go to <https://4-h.org/careers/#!internships> and follow the link to apply online.

### **PART 2:**

Submit the following through email or hard copy:

1. Cover Letter
2. Two written essay questions, using no more than one typewritten page per question:
  - a. **GROUP PARTICIPATION/PERSONAL INVOLVEMENT:** Describe the most meaningful project or organization in which you have participated (4-H or other). Please include the basic goals and objectives of this activity/organization and explain how your involvement led to growth in areas like the following: resource management, teamwork, customer service, organization and evaluation of information, and understanding of social organizations.
  - b. **LEADERSHIP EXPERIENCE:** Describe your most important leadership experience. This could include involvement in youth groups, 4-H, business, and school, i.e., clubs, projects, field trips, etc. (include group size, your specific responsibilities, goals and objectives, leadership techniques, etc.) Explain how each experience enhanced your growth in any of the following areas: ability to design or improve systems, decision-making, problem solving, and self-management.
3. One video question that uses no more than 5 minutes to teach the application review team a new skill or lesson. This can be sent on DVD, thumb drive, CD, or shared via YouTube link.
4. Three completed recommendation forms must be included in order for your application to be considered. One blank recommendation form follows this page.

Send completed Part 2 to:

**Kelsey Conklin**

SPECIALIST, EDUCATIONAL PROGRAMS

KCONKLIN@4HCENTER.ORG

FAX: 301.961.2922

NATIONAL 4-H COUNCIL

PROGRAM ASSISTANT INTERNSHIPS

7100 CONNECTICUT AVENUE

CHEVY CHASE, MD 20815-4999

**PARTS 1 AND 2 ARE DUE BY JANUARY 15**  
INCOMPLETE and LATE APPLICATIONS WILL NOT BE CONSIDERED.



NATIONAL 4-H  
COUNCIL

# NATIONAL 4-H COUNCIL PROGRAM ASSISTANT RECOMMENDATION FORM

Applicant's Name: \_\_\_\_\_

Deadline: \_\_\_\_\_

(Designated by applicant)

The individual named above has applied for a position with National 4-H Council. We would appreciate your assessment of this individual's abilities and qualifications to serve as a Program Assistant. Program Assistants host visitors to the National 4-H Center, lead workshops and assemblies, provide route information to bus drivers. Deliver commentary on field trips, and assist with group logistics.

Feel free to attach additional information in the form of a letter if you wish. Reference information will not be released to any person not officially involved in the employment selection process. **Please enclose the completed form in your company envelope and return to the applicant by the deadline above.** Thank you for your time and effort in completing this form on behalf of the applicant

**Please Rate Each Trait by Placing a Check in the Appropriate Column:**

Skill or Characteristic	Lack Evidence	Additional Experience Needed	Not As Good As Most	About Average	Better Than Most	One of the Best You Could Find
Public Speaking						
Leadership						
Responsiveness to Direct Supervision						
Dependability						
Maturity						
Flexibility						
Motivation/Ambition						
Self-Confidence						
Tact/Diplomacy						
Enthusiasm						
Cooperation/Ability to Work with Others						
Ability to Learn and Then Teach Others						
Judgment						
Initiative/Self Starter						
Creative/Innovative						
Work Habits						

What would you consider this person's strongest assets for this position? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What would you consider this applicant's weakest points for this position? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List three words that best describe the applicant: \_\_\_\_\_

Do you know of any reason(s) why this applicant should not be considered for this type of position?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Additional comments: \_\_\_\_\_

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\_\_\_\_\_

Completed by: \_\_\_\_\_

Name

Title

Street Address

City

State

Zip code

Day Time Phone Number

Signature

Date