

Nigerian Dwarf Goat Association District Youth Representative Application 2010



Thank you for your interest in being a District Youth Representative for the Nigerian Dairy Goat Association. Please complete this application form and mail it to: Youth Committee Chairperson Beth Wood, P.O. Box 313, Woodburn, IN 46797 by Dec.31.2009

District Youth Reps- Two youth are elected from each district to serve a one year term.
Junior Rep-youth ages 12-14 yrs. old
Senior Rep- youth ages 15-19 yrs. old

Youth Reps are expected to:

- * Submit information/article quarterly for the Dwarf Digest and NDGA website.
- * Promotional activities (e.g., visit schools, ag. events)
- * Participate in at least one NDGA sanctioned show per year.
- * Attend local shows or fairs and offer their assistance.
- * Possess a strong knowledge of dairy goats and the Nigerian Dwarf Goat Association
- * Participate in youth committee discussions, surveys and activities.
- * Attend NDGA Nationals when held in their district (if their schedule allows)

Part I: Information (please print! We'll be unable to contact you if we can't read your writing.)

Full Name _____ Email _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Name of School _____ Current Grade _____

Can we share your phone & e-mail information with other teens in the program? Yes ___ No ___

Date of Birth ___/___/___ (You must be 12-19 years old by Feb.1 2009 to participate)

Shirt Size (circle one) CM CL AS AM AL AXL AXXL

Number of years involved with Nigerian Dwarf Goats? _____ Goats in general? _____

Are you or is your family a member of NDGA? _____ Number of goats? _____

NDGA sanctioned shows you attend annually? _____

Which NDGA district do you reside in? (circle one) 1 2 3 4 5

Part II: Short Answer Questions

Please answer both questions. Your answers should be no more than 120 words each, typed, and double-spaced. Please submit answers on a separate piece of paper with your application. (Be sure to put your name at the top of the separate paper.)

- A. Why do you want to be a District youth Representative with NDGA?
- B. How would you describe an excellent District Youth representative

(Continue on reverse side)

Part III: Recommendations

Who will be providing your recommendation? **He/she must be over 21 and not related to you**
(i.e. minister, extension agent, coach, vet, mentor, etc.)

Name: _____ Relationship: _____

Email: _____ Phone: _____

Your Signature: _____ **Date:** _____

Nigerian Dwarf Goat Association District Youth Representative Recommendation Form 2009



Applicant: Please give this form to a person age 19 or over who is not related to you. You may wish to provide him/her with a stamped, addressed envelope as a courtesy.

(Youth's Name) _____ has applied for a District Youth Representative position with the Nigerian Dwarf Goat Association. This will require a commitment of one year to serve as a youth representative for the NDGA. Please answer the following questions as thoroughly as possible and return this form to the Youth Committee Chairperson Beth Wood, P.O. Box 313, Woodburn, IN 46797 by Dec.31st. *Please do not allow the applicant to read this letter of recommendation.*

1. How long have you known and what is your relationship to the applicant?

2. Circle the number that best describes the applicant for the following qualities (1=not at all and 5=exceptionally), comment as appropriate:

	1 2 3 4 5	Comments:
Dependable	1 2 3 4 5	
Attentive	1 2 3 4 5	
Follows directions	1 2 3 4 5	
Responsible	1 2 3 4 5	
Dwarf Goat Knowledge	1 2 3 4 5	
Strong Teamwork skills	1 2 3 4 5	
Flexible	1 2 3 4 5	
Positive	1 2 3 4 5	
Attitude	1 2 3 4 5	

3. How would you describe the applicant's willingness to learn? _____

4. Is the applicant self-motivated and disciplined? Provide examples if possible.

5. Please describe how the applicant interacts with people in general. _____

6. What can you tell us about the applicant that might assist us in determining his/ her qualifications to be chosen as a District Youth Representative? _____

Teen's Name: _____

Your Name: _____

Your address: _____

Your Phone: _____

Your E-mail: _____

Thank you for your time and assistance. Please mail by Dec.31, 2009 to:
NDGA Youth Committee Chairperson
Beth Wood
P.O. Box 313
Woodburn, IN 46797
Tel: 260-466-5976
E-mail: woodbros2@comcast.net