



## Wyoming 4-H Committee, Council or Group End of the Year Report

Name of Group: \_\_\_\_\_ Program Year: \_\_\_\_\_

The mission of the Wyoming 4-H program is to empower youth to reach their full potential, working and learning in partnership with caring adults. In following with the mission we highly suggest that all organized committees, councils, or other 4-H groups be a combination of youth and adults working together.

This committee is:

- \_\_\_\_\_ 1. Youth only with adults serving in advisory roles.
- \_\_\_\_\_ 2. A youth adult partnership with youth and adults working together (preferred)
- \_\_\_\_\_ 3. Adult only

In the case of option 1 or 2 who serve as the primary certified volunteer for this group?

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Who serve as the leadership for this group (must be a certified 4-H leaders or enrolled 4-H members):

Chairman

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Vice Chairman

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Secretary

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Treasurer

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Other

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

4-H entities per the Wyoming 4-H Policies need to have an educational plan that is in line with the mission and values of the Wyoming 4-H program. Use the sections below to show how your group provided educational experiences this past year that were in line with the Wyoming 4-H program mission and values.

### Group/Committee Educational Experiences from this past 4-H year

<i>Educational Learning Activity</i>	<i>When?</i>
<i>Invited a speaker to the county to help with project skills</i>	<i>April 12</i>


**Does your group / committee plan to continue for the next 4-H year? \_\_\_\_\_ Yes \_\_\_\_\_ No**

Meeting Information (for upcoming year)

Proposed regular meeting time: Day of month: \_\_\_\_\_ Time: \_\_\_\_\_

Location where meetings normally will be held: \_\_\_\_\_

Who will serve as the leadership for your group for the upcoming year? If you have not elected a chairperson or group leader yet please note that below.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Initial on each line, showing you have read and understand the statements.

\_\_\_\_\_ As a 4-H entity we understand that the University of Wyoming Extension 4-H Program is a volunteer educational youth development program designed to meet the needs of youth in Wyoming.

\_\_\_\_\_ All programs of UW Extension are expected to practice civil rights compliance. All 4-H clubs or groups must certify that membership is open to all individuals and do not discriminate against any person for reasons of race, creed, color, national origin, sex, religion, political belief, handicap, or financial status.

Attachments to complete the Group Renewal Charter

- Annual Secretary's Report
- Annual Treasurer's Report
- A copy of your by-laws or operating guidelines if they have changed this year. If the copy on file with the UW Extension Office is up to date it is not necessary to turn a duplicate copy in.

**We have read and understand the policies of the Wyoming 4-H program and the Charter Renewal process.**

\_\_\_\_\_  
4-H Adult Volunteer Leader Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
4-H Youth (or Adult Volunteer Leader) Signature

\_\_\_\_\_  
Date

Please turn this form and the necessary attachments into your 4-H County Educator.