

# PENNSYLVANIA YOUNG FARMERS ASSOCIATION

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## OUTSTANDING YOUNG FARMER CHAPTER AWARD

Due by: January 15<sup>th</sup>  
Submitted to: Britney Marsh  
6404 Salem Park Circle  
Mechanicsburg, PA 17050  
BMarsh216@comcast.net

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### Chapter

#### PURPOSE

To recognize the Outstanding Young Farmer chapter for outstanding service to their chapter and community.

#### ELIGIBILITY

1. Chapters that have been affiliated with the PYFA for one year are eligible to enter the contest. The chapter must be in good standing the year following the contest year.
2. A chapter may not receive the Outstanding Chapter award in consecutive years.

#### INSTRUCTIONS

1. The year for reporting is the school year, July 1 to June 30th, preceding the application date.
2. Applications must be sent to Britney Marsh by January 15th.

#### AWARD

1. The Outstanding Young Farmer Chapter Award will be presented at the Annual PYFA Winter Institute.
2. A chapter representative must be present to receive award.
3. Selection will be on a statewide basis.
4. Judges will be chosen by the Awards Committee.
5. Scoring will be based on attached application and attached program of work.

Name of Chapter \_\_\_\_\_  
School \_\_\_\_\_  
Address \_\_\_\_\_  
City / State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

**All data requested is for July 1 to June 30 of year preceding application.**

- |   |         |         |       |
|---|---------|---------|-------|
| 1. Number of members in local Young Farmer chapter                | _____   |         |       |
| 2. Percent of attendance at chapter meetings (yearly average)     | _____   | %       |       |
| 3. Number of chapter educational/business meetings held this year | _____   |         |       |
| 4. Percent of chapter membership paying state dues                | _____   | %       |       |
|   | Members | Advisor |       |
|   |         | Yes     | No    |
| 5. Number attending Regional Leadership Conference                | _____   | _____   | _____ |
| 6. Number attending Summer Young Farmer Institute                 | _____   | _____   | _____ |
| 7. Number attending Winter Young Farmer Institute                 | _____   | _____   | _____ |
| 8. Number attending National Young Farmer Institute               | _____   | _____   | _____ |

9. Check those which apply:

- \_\_\_\_\_ Members submitted application for Outstanding Young Farmer Award, Under 30.
- \_\_\_\_\_ Members submitted application for Outstanding Young Farmer Award, Over 30.
- \_\_\_\_\_ Members submitted application for Outstanding Community Service Award.
- \_\_\_\_\_ Members submitted application for State Officer.
- \_\_\_\_\_ Association submitted an article for State Newsletter.
- \_\_\_\_\_ Members served on State PYFA Committees.
- \_\_\_\_\_ Association submits material to local newspapers.
- \_\_\_\_\_ Association keeps a scrapbook.
- \_\_\_\_\_ Association assisted another group to become chartered.
- \_\_\_\_\_ Association made a survey of potential members.
- \_\_\_\_\_ Association held meetings exclusively for wives.
- \_\_\_\_\_ Association has a Program of Work

10. List outstanding association activities not covered elsewhere in this report in the following areas:

- |                           |                           |
|---------------------------|---------------------------|
| A. Leadership             | C. Community Service      |
| 1)                        | 1)                        |
| 2)                        | 2)                        |
| B. Recreational & Social  | D. Educational Activities |
| 1)                        | 1)                        |
| 2)                        | 2)                        |
| E. Cooperative Activities |                           |
| 1)                        |                           |
| 2)                        |                           |

11. A completed program of work, showing accomplishments and a complete schedule of educational activities to support this application should be securely fastened to the application.

\_\_\_\_\_  
Signature of Chapter President

\_\_\_\_\_  
Signature of Local Chapter Advisor

This certifies that the records herein submitted are complete and accurate.