

**National Grange John Trimble Youth Legislative
Experience Application**

Grange Name _____ Grange No. _____ County _____

State _____ Region _____

Last Name _____ First Name _____

Address _____

City, State, Zip Code _____

Phone number _____ e-Mail address _____

Date of Birth _____ Current age _____

Are you a Male ___ or a female ___ (Please check one)

Date of joining Grange _____ Total average meeting attendance _____

Number of regular Subordinate Grange meeting held in the last year _____

Number of regular Subordinate Grange meetings you attended this last year _____

Highest Degree held in the Grange? _____

Current Office or Committees serving on? _____

A. Legislative Experience you have participated in to date: (For Example, resolutions written, state convention delegate or attendance at business sessions, local government experience, etc....)

B. What do you expect to gain from this experience? _____

C. How do you plan to use this experience in your own Grange, Pomona or State?

D. What is your legislative area of interest? Please prioritize 1,2,3,etc...

_____ Citizenship & Public Affairs _____ Agriculture
_____ Conservation & Natural Resources _____ Education & Health
_____ Labor & Judiciary _____ Transportation & Taxation

Your Signature _____

Your Parent's Signature (if under 18) _____

Subordinate Grange Certification:

This will certify that the above named person is an active member in good standing of our Grange and is eligible to participate in this program, and that the information contained in this report is correct to my knowledge.

Youth Chairman (Signature) _____ Date _____

Subordinate Master (Signature) _____ Date _____

State Certification:

State Youth Director (Signature) _____ Date _____

State Master (Signature) _____ Date _____

Return this form to the National Grange Youth Development Director on or before **September 10.** Please include the letters of recommendation from your Subordinate Master and your State Grange Master.