

Clarion County Fair Memorial Award

Application Packet

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Introduction

The Clarion County Fair Memorial Award recognizes youth with dedication to helping preserve and maintain the quality of the Clarion County Fair.

Deadline: July 31

QUALIFICATIONS FOR APPLICANTS

- The applicant must have been an exhibitor or volunteer at the Clarion County Fair.
- Applicant must have been an exhibitor or volunteer for at least 5 years.
- Applicant must be between the ages of 16 to 21 years old.
- Applicant must have 20 volunteer hours for 2023.
(for 2024—40 hours, 2025—60 hours, 2026—80 hours, 2027 and beyond 100 hours)

APPLICATION PROCEDURES

- The applicant completes the personal data form and submits it to the Clarion County Fair office by July 31.
- The applicant must list two references and include a letter of recommendation from them with their completed application.
- All completed materials should be returned to:

**Clarion County Fair
Attn: Memorial Award Committee
PO Box 280
Hawthorn, PA 16230**

- Applications will be screened by the Clarion County Memorial Award Committee

You will be notified by the committee if they feel that an interview is necessary in the selection process.

Award will be awarded at the Clarion County Fair Fall Banquet in October.

Clarion County Fair Memorial Award

The applicant must complete this page, attach required responses to questions, letters of recommendation, and sign the application.

Please type or print clearly the requested information in dark ink.

Name _____

Address _____

Telephone _____

Age _____ Date of Birth _____

List the 5 years that you were involved in the fair and what your involvement included.

Year	Involvement

Please list two references (not related to the applicant) and include a letter of recommendation from each of them.

Name	Address	Occupation	Phone

All requested attachments should be typed or printed and double-spaced. They should be attached to this form. Please number your responses. Responses to each questions should be 70-100 words.

1. Please describe how this award will benefit you.
2. Please explain what the fair means to you.
3. What recommendations do you have to improve the fair?

APPLICANT'S STATEMENT

I certify that all of the above information is correct to the best of my knowledge. I recognize that the responsibility to confirm that all aspects of the application process have been completed is my own. I understand that the information submitted is confidential and that it will only be used in the Clarion County Fair Memorial Award selection process and that it cannot be returned.

Applicant's signature _____ **Date** _____

