

(Revised 1/19)



Washington State Youth Delegate Application Youth Excellence Seminar (Y.E.S.)

Name: _____ Date: _____

Assigned Number: _____

Thank you for applying to be a Washington State Youth Delegate. Your Application will be assessed in an anonymous format as required by the Bylaws of WSQHYA. Your name will be blackened and your application will be given a number. Your answers and written communication ability will determine your application placement. Please use and/or attach another sheet of paper if necessary.

Why are you applying to be a Delegate?

In your opinion, what has been your best contribution to the Washington State Quarter Horse Youth Association? _____

What life experiences have prepared you to take on this leadership role?

If you are selected to be a Washington State Delegate, what do you hope to bring back and/or accomplish for the Youth membership?

What would you look for in a Region One Director?

What is your best strength? _____

What is your biggest weakness? _____

How are you working on improving your weakness? _____

How can you help WSQHA grow as a member and a YES Delegate?

What does AQHYA have to offer youth members?

Why do you believe you should be a delegate? _____

Other activities with WSQHYA & WSQHA?

Other activities besides WSQHYA?

To be considered for a Washington State Delegate position, this application must be received by the Washington State Youth Advisor at convention.