

FINANCIAL ASSISTANCE APPLICATION

The purpose of financial assistance is to assist any current Waukesha County 4-H member to participate in a planned 4-H activity who would have otherwise been unable to participate due to a financial hardship.

To obtain assistance, complete this application and submit to the Financial Assistance Committee, consisting of the Executive Board President, the 4-H Youth Development Agent and the Chairperson of the Finance Committee. This form must be submitted at least four weeks prior to the due date of money that would normally be paid by the member for the activity.

All requests for assistance will be held in strict confidence

List any other sources from which you have you requested assistance (i.e. district or club)?

Name		Date
Name		Date
Member's Name		
Address		
City	State	Zip
Phone	e-mail	

Reason assistance is requested

Name of planned activity	
Date of planned activity	
Activity Cost	Amount requested
Member's signature	Date
Parent / Guardian signature	Date

For office use only

I certify that I have reviewed this application and interviewed the Member or the Member's Parent / Guardian and have authorized financial assistance be given in the amount listed below.

Note: When financial assistance has been authorized, the person authorizing the assistance must submit this form to the Leaders' Association Treasurer for bookkeeping purposes.

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Amount Authorized	
Authorized by	Date