



Buena Vista County 4-H Fund and Endowment Financial Assistance for Youth

The Buena County 4-H Fund and Endowment Board has approved funds for use by youth who need financial assistance to participate in the Iowa Youth and 4-H program. These funds are intended to provide an opportunity for youth who otherwise would be financially unable to participate in events, activities and individual or group projects at the county, area or state level.

How to apply

The following guidelines have been established for applying for financial assistance.

1. Buena Vista County youth who are potential participants in Extension youth programs or programs recognized by the 4-H Youth Development programs are eligible.
2. An Extension staff member or adult volunteer may submit an application using 4H-FAAV-0404b-BV.
3. Participants should ideally bear some portion of the activity cost. A minimum of \$10 has been recommended. It has been our experience that those who pay a portion of the cost to participate in an event do so with a more positive attitude.
4. The Buena Vista County 4-H Fund and Endowment has a limited amount of money for financial assistance. Funds will be allocated among as many different individuals as possible. Therefore, individuals may request assistance one time per year.
5. March 1, June 1, September 1, and December 1 are the deadlines for submitting requests to the Buena Vista County Extension Office. This deadline will permit a careful analysis of requests and timely allocation of funds.
6. Please include a statement by 4-H leader or parent explaining the financial situation of the family and other pertinent information. No funding will be provided without this financial statement.
7. Use a 4-H Financial Assistance Application for Youth Form (4H-FAY-0404b-BV), available from the Buena Vista County Extension Office.

Publication Date: Revised April 2004



Buena Vista County 4-H Fund & Endowment Financial Assistance Application for Youth

For Office Use Only:

Amt. Funded \$ _____
 Confirmation letter sent on _____

Name _____ County _____ Age _____ Grade _____

Address _____ Phone (____) _____

City _____ State _____ Zip+4 _____

Name of Parent(s) or Guardian(s) _____

Youth & 4-H educational experience I wish to attend _____

Date of Event _____ Total Cost to participate in the event \$ _____

The amount of the cost I will be able to assume \$ _____

Amount paid/pledged by club, county, area, or state level organization \$ _____

Amount requested from Iowa 4-H Foundation \$ _____

Amount requested from Buena Vista County 4-H Fund & Endowment \$ _____

Have you previously received financial assistance from the Buena Vista County 4-H Fund & Endowment?

Yes ___ No ___ If yes, when? _____ For what purpose? _____

Briefly describe your 4-H activities. _____

Signature of Applicant _____ Date _____

Signature of Parent or Guardian _____ Date _____

NOTE TO PARENT AND VOLUNTEER LEADER:

Please provide information regarding the financial need of this individual to assist the selection committee in making allocations. Include a brief paragraph providing information such as: economic conditions of the family such as ADC, food stamps, free or reduced school lunches, loss of jobs, health conditions, single parents, bankruptcy, other means of income for the 4-H'er, and other information of which we should be aware. Information will be strictly confidential.

WITHOUT STATEMENT, APPLICATION WILL NOT BE CONSIDERED.

For application procedures see "Financial Assistance for Youth" 4H-FAY-0404a-BV



Send To:
 Rhonda Christensen
 Buena Vista County Extension Office
 P O Box 820, 824 Flindt Dr
 Storm Lake
**By March 1, June 1,
 September 1, or December 1**