



Pioneer Seed Grant
 Iowa 4-H Club Community Improvement Projects
 sponsored by Pioneer and the Iowa 4-H Foundation
 in conjunction with
 Iowa 4-H and Youth Programs
www.extension.iastate.edu/4h/serve/grants.htm



Due in County Extension Office by January 16 and in State 4-H Youth Office by January 30.

- Read and follow directions on the accompanying "Pioneer Tips". Be as specific as possible with regard to plans and budget.
- This application should be filled out by the 4-H'er(s) in charge of the project. Submit one copy to your county Extension office, as their signature and comments are very important.
- This is an editable document in MSWord.doc format; boxes will expand with typing. Place cursor in box and enter response. If your computer does not support MSWord.doc, please try the .rtf format or Adobe .pdf.
- **A letter of support** from the governing board of the project location **MUST** accompany the application.
- **Do not** attach additional information, other than the letter of support, unless it is essential for an understanding of your proposed project.

Name of 4-H Club:

County: **Number of 4-H members in club:**

Project chairperson (4-H'er) and complete mailing address:

Phone: **E-mail:**

Adult leader and complete mailing address:

Phone: **E-mail:**

Statement of Need: Describe the problem/issue in your community you wish to address.

Proposed Project: Describe your project in one or two sentences. Tell how your project will address this identified need. Who or how many will benefit from this project?

Goals for Your Club: What knowledge, attitudes and skills does your 4-H group expect to learn through the different stages of this project?

Methods: Describe what you plan to do to meet the needs and accomplish your goals. Include a timetable of the project.

Involvement in Project: What part will 4-H members play in planning and carrying out the project? Describe assignments and responsibilities to include all members. What will other individuals, service organizations and agencies do on this project?

Evaluation Plan: How will you measure the outcomes of your project? How will you determine if you met your goals? What is your plan for sharing your accomplishments?

Proposed Budget: Give expected income and expense for this project for one year.

Estimated Project Funding		Estimated Project Expenses	
Sources	Amounts	Items	Amounts
Pioneer Seed Grant			\$ _____
(amount requested from Community Improvement Program, maximum = \$500**)			\$ _____
	\$ _____		\$ _____
Additional Sources:	\$ _____		\$ _____
	\$ _____		\$ _____
	\$ _____		\$ _____
	\$ _____		\$ _____
	\$ _____		\$ _____
*Total	\$ _____	*Total	\$ _____

*The two totals must be the same.

**Amount requested from Pioneer should equal no more than half the budget, cannot exceed \$500, or be below \$50.

Date of application: _____

Signature of project chairperson (4-H'er): _____

Signature of adult volunteer leader: _____

Comments by county Extension staff member:

Signature of county staff member: _____
(please, also print name)

Due in County Extension Office by January 16 and in State 4-H Youth Office by January 30.

IOWA STATE UNIVERSITY
Extension and Outreach