IOWA STATE UNIVERSITY
Extension and Outreach

Request for Financial Assistance

Youth or Adult Programming

To apply for financial assistance for any ISU Extension and Outreach programming, complete Parts A, B and C and return form to your local ISU Extension and Outreach office.

A. PARTICIPANT INFORMATION:

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

If 4-H or Other Youth Programming:

Age of Youth: _____

Name of Parent/Guardian: _____

B. PROGRAM INFORMATION:

Program Financial Assistance is to be used for:

_____

Amount Requested for activity: $ _____

Amount I am able to contribute: $ _____

Total Amount Needed for activity: $ _____

C. SIGNATURES:

Signature of Participant: _____

Signature of Parent/Guardian *(if youth program)*: _____

Date Submitted *(for office use only)*: _____

Iowa State University Extension and Outreach does not discriminate on the basis of age, disability, ethnicity, gender identity, genetic information, marital status, national origin, pregnancy, race, religion, sex, sexual orientation, socioeconomic status, or status as a U.S. veteran. (Not all prohibited bases apply to all programs.) Inquiries regarding non-discrimination policies may be directed to Ross Wilburn, Diversity Officer, 2150 Beardshear Hall, 515 Morrill Road, Ames, Iowa 50011, 515-294-1482, wilburn@iastate.edu.