



Asotin County 4-H Adult Scholarship Request Form

Office Use Only:
Date Received:
Received by:

This form must be submitted into the EXTENSION OFFICE 30 days prior to the event that you plan to attend.

Name: _____ 4-H Club Name: _____

Name of the event that you plan to attend: _____

Date and Location of the event: _____

Amount of money requested: \$ _____

4-H Leader's Council Scholarship Request Form
The Asotin County Leader's Council supports activities that promote the development of life skills in youth and adults. 4-H Leaders Meetings are held on the 2nd Monday each month beginning at 7:00 pm. No meetings are held during the months of December, July and August.

1. Why should I receive this funding/scholarship? Why do I want to chaperone this event?

2. I am currently enrolled as a 4-H leader? Yes No

3. I have a current criminal background check? Yes No

4. I have completed the "Put The Child First" training? Yes No

5. I can provide transportation for _____ youth and or adults.

6. Other funding requested Source: _____ Amount \$ _____

Source: _____ Amount \$ _____

I agree to present information on the event that I attended at the next regularly scheduled 4-H Leaders' Council Meeting after I complete the event.

Your Signature

Today's Date