

Mahoning County 4-H Endowment Funding Proposal

Name (individual or group): _____

Date of Submission: _____ Funds Requested: _____ Date of Event/Project: _____

Contact Person: _____ Phone: _____

Email: _____ Check Payable to: _____

Proposal Details

Below please provide details of your proposed use of the funds being requested from the Mahoning County 4-H Endowment Fund. Please include the type of event/activity/purchase, the scope/scale/size of impact that this event/activity/purchase will have on the community, how this event/activity/purchase will specifically affect Mahoning County youth, any other funding secured or funding sources being pursued, and any other details you feel are relevant.

Commitment

By signing below you agree to use any funds awarded by the Mahoning County 4-H Endowment Committee as described in this proposal. You also agree to uphold the values of the 4-H program, which include a core focus on positive youth development, working to “make the best better”, and helping youth “learn by doing.” You also agree to submit receipts and a financial summary of the event/activity/purchase to the 4-H Endowment Committee within 3 months after completion.

Contact Person: _____ Date: _____

Secondary Representative: _____ Date: _____