

Adams County 4-H Foundation Individual Application



This application is to be completed by an individual 4-H member or 4-H club in Adams County, Illinois for any activity, workshop, project support, supplies, community service or program fees. Applications will be reviewed when received on a first come basis. 4-H Youth completing the application will be notified of acceptance or denial. Application should be filed to allow ample time for processing and payment deadlines. Applications can be submitted to Siera Duesterhaus at snthomps@illinois.edu, mailed, or dropped off at the Adams County Extension Office at 330 S. 36th St. Quincy, IL. Applications are good from Sept. 1st to June 1st. No applications will be approved for 4-H Supplies from June 1st through September 1st.

Application Date: _____

Name of 4-H member: _____ Years in 4-H: _____

4-H Club: _____ Email: _____

Phone: _____

4-H members are eligible to apply for up to \$200- Project Supplies, up to \$300 to assist with conference fees, and up to \$500 for National 4-H events.

This application is for:

- 4-H Enrollment Fee
- 4-H Event/Workshop
- Community Service Project
- Supplies
- Other: _____

If other, please explain: _____

Purpose of application (please include all information; supplies needed, event, date of event, etc.)

Scan & email form to: snthomps@illinois.edu OR drop off at the Adams County Extension Office at 330 S. 36th Street in Quincy, IL.

Total Amount Requested:\$ _____

Name of Supplier if applicable: _____

How did you learn of the Adams County 4-H Foundation funding and application process?

How will the funding relate to your individual 4-H Project plan and 4-H goals for the current year?

How does this funding help you grow in your project, increase leadership skills, share information or increase awareness to others?

Are you seeking additional funding from other sources? If yes, please list other sources and amounts.

I agree to submit photos of my project for publication purposes.

4-H Member Signature: _____

Parent/Guardian: _____

4-H Club Leader: _____

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Approved? Yes/ No

Please note: Billing MUST be arranged and paid through the 4-H Office.
4-H Members WILL NOT be reimbursed for expenses.

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