

Wyoming 4-H Grant Authorization



Grant Applicant Information

Name:
Address:
City, State Zip:
Phone Number:
Email:

Grant Provider Information

Name:
Address:
City, State Zip:
Phone Number:
Email:
Web site:

NOTE: The 4-H Name and Emblem are protected under federal statute Title 18, U.S. Code 707. Therefore, any requests you might have that support 4-H should have this form attached providing acknowledgment that this request is in alignment with programming efforts of the 4-H program. If any 4-H requests do not have this form with them, please contact us to ensure the integrity of our program and yours. (307.766.5170)

Grant Title: _____

Period of time grant covers- Start: _____ End: _____

Amount Requested: \$ _____

Please provide a brief summary of the purpose of the grant. What is being applied for?

Is this grant for purchase or to obtain equipment? YES NO

If equipment will be obtained how will be the equipment be used, stored, and maintained?

| | | | |
|----------------------|--------------|-----------|-------|
| Grant Applicant: | _____ | _____ | _____ |
| | Printed Name | Signature | Date |
| County 4-H Educator: | _____ | _____ | _____ |
| | Printed Name | Signature | Date |
| State 4-H Office: | _____ | _____ | _____ |
| | Printed Name | Signature | Date |