



Ohio State University Extension

724 South 7th Street, Coshocton, Ohio 43812
Phone (740)622-2265

4-H ENDOWMENT GRANT APPLICATIONS

Dear Applicant:

Attached please find the application form for submitting grant proposals to the Coshocton County 4-H Endowment.

Funds will be awarded annually. The application deadline will be May 31 St. Each application will be reviewed carefully by the selection committee.

We encourage both group and individual applications. Funds may be requested for a learning experience such as leadership seminars or workshops. Funds may also be requested to implement a community service project. Upon signing and submitting your proposal, you are agreeing to adhere to the guidelines set forth by the Coshocton County 4-H Endowment Committee.

Should your proposal not be selected at this time, please do not be discouraged. We welcome multiple and repeat applications.

Sincerely,

Coshocton County 4-H Endowment Committee

COMMITTEE OFFICERS

Nick Fischer, President

Jim Overholt, V. President

Phyllis Debnar, Sec/Treas.

COMMITTEE MEMBERS

Debbie Endsley

Ray Griffith

Nate McNeal

Joyce Mullett

Christy Nelson

Carole Owens

Beccy Porteus

Maureen Pritchard

Dave Wagner

Sarah Jane Lindsey Extension Educator 4-H Youth Development

**COSHOCTON COUNTY 4-H ENDOWMENT FUND
FUNDING APPLICATION**

Deadline to Extension Office May 31st, current year.

1. Name of group or individual requesting funding:

ADDRESS_____

CITY, STATE & ZIP_____

CONTACT PERSON_____PHONE_____

For Individual Requests Only:

* With which club or organization are you affiliated?

* How long have you been associated with this club or organization?

* Name and phone number of two references:

_____ Signature_____Date_____

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A written report of your activity will be required prior to the annual meeting of the Coshocton County 4-H Endowment Committee.

(Submit written report to the Extension Office by November 1.)
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2. Name of program for which funding is being requested:

_____ A. Date program is to begin & date completed:_____

B. Location of program:_____ (Where program is to be carried out)

C. Briefly describe your project or program:

3. Funding:
- A. Total funds needed to complete this program: \$_____
 - B. Funds requested or received from other sources:
(Please list)
 - 1. _____ \$_____
 - 2. _____ \$_____
 - 3. _____ \$_____

(attach additional sheet if necessary)
 - C. Funds being requested from Coshocton County
4-H Endowment Fund: \$_____

- 4. How is this program innovative or creative?:

- 5. How will this program benefit the group or individual requesting funding?:

- 6. How will this program benefit Coshocton County 4-H?:

- 7. How will this program reach or benefit those in your community?:

- 8. What are your plans for insuring the success of this program?:

- 9. Will you be publicly recognized for your project?:

Approved funds will need to be spent by December 31st of the current year. A report on the use of the funds would be due into the Extension Office by December 1st.