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Please complete and submit this form to:
University of California, Agriculture and Natural Resources
California State 4-H Office
2801 Second Street
Davis, CA 95618

Title of event: _____

Please describe event in 250 words or less (overall summary of the event).

What are the expected benefits for the participants?

Date and time of event: _____

Name and contact information of the state team or participant(s) requesting that the event be considered. *(Note: the team should include at least one 4-H YDP staff person, a volunteer, and a youth).*

Staff Name: _____

Address: _____

Email: _____

Phone: _____ Cell: _____

Signature: _____

Adult Volunteer Name: _____

Address: _____

Email: _____

Phone: _____ Cell: _____

Signature: _____

Your Name: _____

Address: _____





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Email: _____

Phone: _____ Cell: _____

Signature: _____

*For additional participants, please attach contact information on a separate paper.

Please indicate the primary contact: _____

Signature of the Associate Director of 4-H Program and Policy: *(By signing the Associate Director acknowledges that s/he is aware of the proposed event)*

Provide link to websites that might provide additional information, if available:

FOR RECURRING EVENTS

Is this a recurring event? Yes No
If yes:

How often will it be repeated? _____

Describe how it will be sustained beyond the first year.

- *What is/will be the process for passing on the leadership for the program?*
- *Is there (or will there be) a procedures manual available?*
- *What are the plans to secure sustainable funding?*

PARTICIPANT INFORMATION

Describe the target audience, including age/grade level:

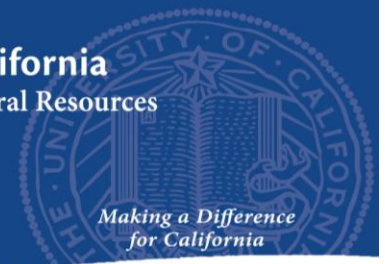
How many youth/adults are expected to participate in the event?

Youth: _____

Adults: _____

Is there a cost to participants? If so, what is the estimated cost? _____





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Is there an application or qualification process (*i.e., enrollment in a project area, staff approval, etc.*) for determining eligibility for participation? If so, please describe:

LOCATION/SAFETY

Location of event:

City: _____ State: _____

Name/type of facility: _____

Is the location easily accessible by major highway/roads? _____

How close is the nearest airport? _____

Are all facilities ADA (American Disabilities Act) compliant? _____

What safety precautions have been or will be taken? (*Keep in mind specific needs for this particular event*). _____

How will appropriate youth supervision be provided? _____

FINANCIAL INFORMATION

On a separate sheet, please include a detailed budget for this event including expenses and income (*e.g., registration cost, facility costs, travel, meals for participants*). See *4-H Treasurer's Manual* for example of budget form.

Will there be fundraisers at the event? If so, please describe. _____

Are there scholarships and/or financial aid available? If so, please describe _____

YOUTH DEVELOPMENT COMPONENT

What will participants learn at this event? (See the [UC 4-H YDP Framework](#) for youth development and educational outcomes.)





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What authentic leadership roles will youth play in planning, implementing, evaluating and fundraising for this event?

How will 4-H members share what they learned when they return to their home counties?

How does the event support the [4-H YDP Mission & Direction Program Criteria](#)? (Please attach checklist).

EVALUATION

How will this event be evaluated? _____

When? _____

Who is responsible for evaluating the event? _____

How will it be demonstrated that the event was successful with regards to the youth development goals described in the previous section? _____

Who is responsible for submitting post-event information and evaluation data to the State 4-H Office? _____

ADDITIONAL QUESTIONS FOR COMPETITIVE EVENTS

What additional benefits are obtained because of the element of competition? _____

Is there a pre-qualifying competition for this event? (Please name the event): _____

If YES....Does the state competition meet minimum requirements for national competition (if applicable)? _____





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If NO...

Are there resources available to start one? _____

Or, is there an alternate means of selection? _____

What events or trainings exist to prepare youth for this competition? _____

How will the judging criteria be made available to the participants in advance of the event? _____

How will the judges score the participants? Has the scoring tool been reviewed and piloted? _____

How will youth receive feedback on their performance? _____

What is the award system used and why? (*Danish vs. American*) _____

What types of recognition will be given to participants? _____

Name and contact information for the national event host.

Staff Name: _____

Address: _____

Email: _____

Phone: _____ Cell: _____

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