

## Request for 4-H Program Fee Waiver/Reduction

The 4-H Youth Development Program is open to participants, regardless of their ability to pay. Program fees will be waived or reduced for eligible youth. Provisions will be made by the 4-H unit (e.g., club) or volunteer management organization (e.g., council) to cover program fees for eligible youth who are unable to pay them. It is recommended the parent/guardian of an eligible youth for which a program fee waiver or reduction is requested should complete, sign and submit this form. However, parent/quardian of eligible youth may also contact the county 4-H office to discuss the current local process for Fee Waiver/Reduction requests.

Name of 4-H Youth (Print):		
	(First)	(Last)
4-H Un	nit/Club Name:	
Progra	m Year: 20 20	
	I am requesting a waiver of the program fee in full.	
	I am requesting a reduction of the program fee to the amount of \$	
	To determine eligibility for a full waiver or reduction of the program fee, please indicate if:	
	Annual household cash income is at or below \$52,720. See Reference: <a href="https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines">https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines</a> . 2024-2025 Federal Poverty guidelines. If yes, you are eligible to apply for a reduction or waiver of your 4-H program fees.	
	Full Name of the Parent/Guardian of Youth (Print)	
	Signature of Parent/Guardian of Youth	Date
	Return To: (insert UCCE county office address below)	

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