

**2011 Teen Involvement Conference
San Bernardino County Teen Council
Financial Assistance Application**



Club: _____

Name: _____ Age: _____

Address: _____

City: _____ Zip: _____

Telephone: (_____) _____ Years in 4-H: _____

Have you attended T.I.C. before? Yes No

1. Why are you interested in attending this conference? _____

2. Why do you think you are qualified to attend? _____

3. How have you contributed to the 4-H Youth Development Program? _____

4. Are there any other sources of funding available to support your attendance at this conference? What are they and how much? _____

In 250 words, please answer the following question on an additional piece of paper:

After the conference, what do you hope to do with the information you will have learned?

By signing below, you agree to the accuracy of the information provided.

Signature of Applicant: _____ Date: _____

Parent Signature: _____ Date: _____

Local Club Leader: _____ Date: _____

APPLICATION MUST BE RETURNED TO THE 4-H OFFICE BY

DECEMBER 1, 2010

Office Use Only

Date received: _____

Staff initials: _____ Approval Amt _____