



4-H in Santa Barbara County Request for 4-H Program Fee Waiver/Reduction

8/2019

Provisions will be made by the 4-H club/unit or county council (VMO) to cover program fees for eligible youth who are unable to pay them. The parent/guardian of an eligible youth for which a program fee waiver or reduction is requested must complete and sign this form.

A. Name of Youth (Print): _____
(First) (Last)

B. Club/Unit Name: _____

C. Program Year: 20____ - 20____

D. I am requesting a waiver of the program fair share fee in full.

---Or---

I am requesting a reduction of the program fair share fee to the amount of \$_____.

E. To determine eligibility for a waiver or reduction of the program fee, please indicate if:

Monthly household cash income is at or below 185% of the Federal Poverty guidelines. If your child is eligible for/enrolled in free or reduced price school breakfast or lunch you meet this criteria.

(Reference: <http://www.fns.usda.gov/cnd/governance/notices/iegs/iegs.htm>)

UC reserves the right to verify the above information by further reviewing the household financial status with the parent/guardian.

Name of Parent/Guardian of Youth (Print)

Signature of Parent/Guardian of Youth

Date

RETURN TO:
UC Cooperative Extension Office - Santa Barbara County STAFF
aeborunda@ucanr.edu