

**PRINCE EDWARD ISLAND 4-H TRUST
APPLICATION FOR FUNDING**

APPLICATION DUE BEFORE NOVEMBER 30 or MARCH 31

I. Identification of Applicant:

please check one

Individual Club Regional Council _____

Provincial Committee P.E.I. 4-H Council Other _____

Contact Person: _____

Address: _____

Telephone Number: _____

If approved, to whom should the cheque be made payable: _____

II. Identification of Project or Activity:

(Please use a sheet of paper if extra space is needed and attach to the application.)

A. Project Objective (clearly state the result(s) expected from this project)

B. Project Description (describe in detail the project):

C. Budget (provide a complete project budget, attach another sheet if necessary):

Projected Expenses	\$ Amount	Projected Income	\$ Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Total Projected Expenses	_____	Total Projected Income	_____

Name of Applicant Signature of Applicant or
Applicant Officer Date

Please submit this application to:

**PEI 4-H Council
P.O. Box 2000
Charlottetown, PE C1A 7N8**

Prince Edward Island 4-H Council Approval

**The Prince Edward Island 4-H Council has approved this
application and forward it to the PEI 4-H Trust**

PEI 4-H Council President Date