#  NEW 4-H Clubs and Groups

#  Wisconsin 4-H cHARTER APPLICATION

 4-H Youth Development February 2018

These Articles of Organization are entered into by those who have signed below for the purpose of forming a 4‑H Club or 4-H Group as an Unincorporated Nonprofit Association under Ch. 184 of the Wisconsin Statutes. These are completed **once** for the lifetime of the 4-H club or group.

**Article 1. Name of the 4‑H Club or Group/Committee, which is organized as an association by this document:**

Check One: 🞎 4-H Club 🞎 4-H Group

**A.** **Name of the County in which the 4‑H Club or Group is located:**

Lincoln

**B.** **County 4‑H Youth Development Educator, who, by signing below, agrees to oversee the 4‑H Club or Group and act as the 4‑H Club or Group’s agent:**

|  |  |  |
| --- | --- | --- |
| *Signature:* | *Printed Name:* | *Date:* |

**C.** **Address of the County UW-Extension Office, which will serve as the mailing and business address for the 4‑H Club or Group:**

|  |
| --- |
| *Street Address:**801 N Sales Street, Suite 101* |
| *City:**Merrill* | *State:*WI | *Zip Code:**54452* |

**Article 2.** The 4‑H Club or Group’s term of existence shall be perpetual. This means that the 4‑H Club will continue to exist until it is dissolved, according to UW-Extension 4‑H policies and the 4‑H Club’s bylaws.

**Article 3.** The purpose of the 4‑H Club or Group is to organize and operate exclusively for the nonprofit purposes allowed by Section 501(c)(3) of the Internal Revenue Code. Section 501(c)(3) prohibits the 4‑H Club or Group from paying any profits, above reimbursements for the 4‑H Club or Group’s expenses, to any of its members, directors, or officers. Additionally, Section 501(c)(3) prohibits the 4‑H Club or Group from taking sides either in political campaigns or in any effort to pass a specific law. This 4‑H Club or Group will primarily operate for educational purposes.

**Article 4.** The 4‑H Club or Group agrees to comply with all applicable UW-Extension policies and procedures governing 4‑H, and agrees that the County 4‑H Youth Development Educator has all necessary and proper authority to oversee the 4‑H Club or Group to ensure the 4‑H Club or Group’s compliance.

**Article 5.** UW-Extension is authorized to include the 4‑H club or group in a group tax exemption, and the 4‑H Club or Group will supply the County 4‑H Youth Development Educator all necessary documentation to ensure the 4‑H Club or Group’s inclusion in a group tax exemption.

**Article 6.** The 4‑H Club or Group’s members, directors, or officers will be selected according to the UW-Extension 4‑H policies and the 4‑H Club or Group’s by-laws.

**Article 7.** These articles can be changed according to the policies, rules, and laws that apply at the time the articles are changed.

**Article 8.** Upon dissolution of the 4‑H Club or Group, any assets will be permanently dedicated to nonprofit purposes and turned over to another recognized 4‑H club, unit, or group with the approval of the 4‑H Leaders Association and the county 4‑H Youth Development Educator. The recipient of the 4‑H Club or Group’s assets will only operate for the nonprofit purposes allowed in Section 501(c)(3) of the Internal Revenue Code.

**Article 9.** **Name, address, and signature of each organizer—the organizers are the 4‑H Volunteer Organizational or Group Leader(s) and the 4‑H Youth President or Chair:**

|  |  |  |
| --- | --- | --- |
| *Signature of 4‑H Volunteer Organizational or Group Leader who is 18 years of age or older:* | *Printed name of 4‑H Volunteer Organizational or Group Leader who is 18 years of age or older:* | *Date* |
| *Street Address:* |
| *City:* | *State:* | *Zip Code:* |

|  |  |
| --- | --- |
| *Signature of 4‑H Youth President or Chair:* | *If 4‑H Youth President or Chair is under 18 years of age, signature of parent or legal guardian:* |
| *Printed name of 4‑H Youth President or Chair:* | *Date:* | *If 4‑H Youth President or Chair is under 18 years of age, printed name of parent or legal guardian:* | *Date:* |
| *Street Address:* |
| *City:* | *State:* | *Zip Code:* |

Optional: Complete this box if an additional 4-H volunteer serves in an organizer role.

|  |  |
| --- | --- |
| *Signature of volunteer organizer:* | *If organizer is under 18 years of age, printed name of parent or legal guardian:* |
| *Printed name of volunteer organizer:* | *Date:* | *If organizer is under 18 years of age, printed name of parent or legal guardian:* | *Date:* |
| *Street address:* |
| *City:* | *State:* | *Zip Code:* |

# 4-H Club OR GROUP’S LEADERSHIP Information

**Complete for the charter application year of November 1 through October 31.**

County: \_\_\_\_Lincoln\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Today’s Date (mm/dd/yy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of 4-H Club or Group \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 🞎 4-H Club 🞎 4-H Group

Name of Primary 4‑H Club/Group Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone:

4‑H Club or Group MEETING Information For THIS FIRST YEAR

Regular 4-H Club or Group **meeting time**: Day of month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Location** where 4-H Club or Group meeting normally will be held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the meeting site **handicap accessible**? ☐ Yes ☐ No

Will the 4-H Club or Group have a ***Facebook or other social media site***?

Yes ☐ No ☐ If yes, address of site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wisconsin 4-H Policies state that every 4-H Club or Group must have written operating guidelines or bylaws approved by the members to govern the club or group. **Attach *one copy* of the 4-H Club’s or Group’s written operating guidelines or bylaws** to this form when completed.

Date distribution of bylaws to members*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Date bylaws or operating guidelines were developed and approved by members:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Chartered Club or Group Requirements**

|  |  |  |
| --- | --- | --- |
| Wisconsin 4-H chartered Clubs and Groups must meet the following requirements. Please check *Yes* if your club or group meets the requirement, check *No* if they do not. | **Yes** | **No** |
| 1. | Five or more youth from at least three families. |[ ] [ ]
| 2. | Approved adult leadership who has completed the UW-Extension Volunteer in Preparation (VIP) Youth Protection process. |[ ] [ ]
| 3. | One or more leader(s) attended the Annual Volunteer Leader Team Training. (This training is required for charter renewal and is not the VIP orientation.) |[ ] [ ]
| 4. | Meet on a continuing basis. |[ ] [ ]
| 5. | Open to any youth eligible for 4‑H membership, regardless of race, color, creed, religion, sex, national origin, disability, ancestry, sexual orientation, pregnancy, and marital or parental status. |[ ] [ ]
| Including the Essential Elements of Positive Youth Development (Mastery, Generosity, Independence, and Belonging) into your club or group creates an environment where youth experience positive growth and development.  |
| 6. | ***Mastery:*** Educational plan involving business, community service, education, and recreation/socialization, which meets the purposes of the 4‑H program |[ ] [ ]
| 7. | ***Generosity****:* Youth have opportunities to contribute through community service. |[ ] [ ]
| 8. | ***Independence:*** Youth involvement in leadership and decision-making. |[ ] [ ]
| Example of opportunities you have created: |
| 9. | ***Belonging****:* Youth and adults create a welcoming environment for all members and families. |[ ] [ ]
| Example of strategies you are using: |

By signing below, your club or group indicates it is in compliance with all of the 4-H charter requirements checked above, (1-9).

If your club or group is not in compliance with any of the requirements on page one (1), a plan for being in compliance will need to be submitted to your 4-H Youth Development Educator and a provisional charter will be issued for this charter renewal year.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 *Print 4-H Adult Volunteer Leader Name 4-H Adult Volunteer Leader Signature Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_*

*4‑H Youth Leader Name 4‑H Youth Leader Signature Date*

*(Club President or Group Youth Leader) (Club President or Group Youth Leader)*

**Club or Group Smart Goals**

**Our goals are S.M.A.R.T.** goals that stand for Specific, Measurable, Achievable, Results-focused, and Time bound.

This year, each club or group is asked to write one or two club goals that focus on *reaching out to youth and families who are underrepresented in their 4-H club/group.* Highlight how these goals will be met in the club yearly calendar.

Below are several topic areas that you can use to brainstorm with the youth members to help them think about how they can expand access and learn more about others.

* *What steps will you take to help underrepresented youth join your club?*
* *How will the club or group make specific efforts to learn about other cultures?*
* *How can club members get to know youth from other cultures? Is there a community center that your club could partner with on an event; family activity or community service project?*
* *What welcoming activities will the club do to ensure youth and families feel included?*
* **Share the SMART goals your club or group has set for this club year to focus on Expanding Access:**

For Example: We will translate the club open house brochure into Spanish and distribute it with an English copy to all youth in 3rd – 6th grade at the elementary school this fall.

* **Please share the SMART goals your club or group set last year and indicate progress your club or group made on these goals:**

|  |
| --- |
| 4‑H CLUB or Group CALENDAR PLANNER**Please provide** meeting dates, planned business topics and educational programming for each meeting. The three parts of *effective* 4‑H meetings are business, education and recreation. **Attach** 4-H Club or Group Annual Calendar. Calendars should include the month, meeting logistics (date, time, location for each month’s meeting), meeting, event, activity. A suggested format follows OR **complete the planner that is included on page 4 of this document.** |
| **Month** | **Meeting Logistics** | Meeting, Event, Activity |
| **SAMPLE** | **September 12, 7:00 p.m.****Clover Center Town Hall** | **Business Items: Election of Officers, Community Service idea for fall, form Holiday Party Committee****Education/Program: Speaker about Dia de los Muertos (Day of the Dead)****Welcoming Activities/Recreation:**  |

|  |
| --- |
| **4-H CLUB or Group CALENDAR PLANNER**(calendar template to be completed if not attaching a separate calendar for the year) |
| October |  | Business Items: Education/Program: Welcoming Activity/Recreation:  |
| November |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| December |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| January |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| February |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| March |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| April |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| May |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| June |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| July |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| August |  | Business Items: Education/Program: Welcoming Activity/Recreation: |
| September |  | Business Items: Education/Program: Welcoming Activity/Recreation: |

# 4-H Club or Group ANNUAL FINANCIAL REPORT

**Name of 4‑H Club/Group**: **Today’s Date (mm/dd/yy)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4-H money is public money**. The safety of all 4-H funds, volunteers and members are of the highest priority. UW-Extension, Cooperative Extension 4-H Youth Development is accountable for the educational programs and finances of all 4-H Clubs and Groups.

* The 4-H fiscal year is July 1 through June 30.
* All 4-H Clubs and Groups must comply with [Wisconsin 4-H Youth Development Policies](http://4h.uwex.edu/about-4-h/policies/) regarding finances.
* All 4‑H Clubs and chartered Groups that handle money are required to have an Employee Identification Number (EIN) number and submit a financial record and audit report to the County UW-Extension Office once each year. All 4-H Clubs must file an IRS Form 990 annually in cooperation with the 4-H Youth Development Educator
* Federal regulations governing the use of the 4‑H Name and Emblem require annual financial reporting/accountability of all organized 4‑H Clubs and Groups. Failure to annually submit the financial report could result in loss of approval to use the 4‑H Name and Emblem and the 4-H Charter
* Funds raised in the name of 4‑H must be publicly accountable and must be used for 4‑H educational purposes.
* It is recommended that 4-H Clubs and Groups use a cash accounting method
* Bank accounts need to have two signatures, one adult volunteer with oversight for the club or group’s finances and the youth treasurer. These two persons should not be related.

**Information that will be required annually on the Annual Financial Report includes:**

* EIN (Employer Identification Number), also known as Federal Tax Identification Number.
* Wisconsin or Tribal Sales Tax Exempt Number, if your 4‑H Club or Group chooses to get one.
* A bank statement for all accounts held by the 4-H Club or Group.
* A list of all funds received and funds dispersed and reported in the appropriate category.
* Identification of 4‑H Club or Group accounts.
* Documentation of the annual financial review of the 4‑H Club or Group accounts.

**\*Employee Identification Numbers (EIN):**

* The IRS requires UW-Extension to annually certify the complete list of subsidiary groups who are eligible to use the 4‑H general tax exemption number (GEN). To accomplish this, each 4-H Club or chartered Group must submit an Annual Charter Renewal Packet with complete financial accounting to the 4-H Youth Development Educator working with the 4-H Club or Group. In turn, the 4-H Youth Development Educator is responsible to keep the official list of Wisconsin 4-H Clubs and Groups up to date.
* The EIN number is needed prior to opening a 4‑H Club or Group checking or savings account.
* If your club does *not* have an EIN number yet, a form is available at: <http://www.irs.gov/pub/irs-pdf/fss4.pdf>. A sample form is located at: [Sample SS-4 Form](http://www.uwex.edu/ces/4h/resources/mgt/documents/fss42014.08.27.14fillable.pdf) . **Under the Fax-TIN program**, you can receive your EIN by fax generally within 4 business days. Complete and fax Form SS-4 to the IRS at 1-(859) 669-5760. Fax-TIN phone numbers can only be used to apply for an EIN. The fax numbers may change without notice. **Remember to provide your fax number so the IRS can fax the EIN back to you,** or **mail to:** Internal Revenue Service Center, Attn: EIN Operation, Cincinnati, OH 45999 Allow 4 to 5 weeks. It is not recommended to use the IRS Internet online tool for obtaining an EIN because it requires giving a SS number.
* Contact your 4-H Youth Development Educator for assistance as you complete the SS-4 form.

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Pages 8-9 are a **sample** of what is expected for each 4-H Charter Renewal. **You may complete this if these are in place** **at this time or use this as a worksheet as you put money handling practices in place with the 4-H Club or Group.**

**4-H CLUB OR GROUP ANNUAL FINANCIAL REPORT**

Federal regulations governing 4-H clubs and 4-H groups authorized to use the 4‑H Name and Emblem require funds raised in the name of 4‑H must be publicly accountable and must be used for 4‑H educational purposes. In addition, all 4‑H Clubs and Groups that handle money must have an Employer Identification Number (EIN) number and annually submit a report which includes a record of their finances and verification of a financial review. **Failure to annually submit the financial report could result in loss** **of approval to use the 4‑H Name and Emblem and the 4-H Charter.**

**EIN** (Employer Identification Number, also known as the Federal Tax ID Number) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Wisconsin or Tribal Sales Tax Exempt Number** (if the 4-H Club or Group has one) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Complete the following information based on the previous 4-H fiscal year, July 1 through June 30.**

*For your report to be complete and accepted the ending balance (D) must be equal to the total funds listed under (A) Beginning Balance* ***plus*** *(B) Total Funds Received* ***minus (C) Total Funds Disbursed*** *A+B-C=D*

**DO NOT LEAVE ANY BOXES BLANK – Enter zero or the dollar amount**

**Annual Accounting Form**

|  |  |  |
| --- | --- | --- |
|  | **Beginning Balance (July 1)** | **Ending Balance (June 30)** |
| Checking Account |  $ |  $ |
| Savings Account (combine all savings, money market, CD’s, etc.) |  $ |  $ |
| **Total Funds** | **(A) $** | **(D) $** |

*4-H Clubs and Groups must use the categories as listed below as identified. Suggested additional categories for* ***Funds Disbursed*** *include: Dues Paid to County, Educational Supplies, Community Service Expenses, Recreation, etc.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Funds Received** |  | **Funds Disbursed** |  |
| Fund Raising (do not subtract expenses) | $ | Fund Raising Expenses | $ |
| Member Dues | $ | (*list category*) | $ |
| Donations1 | $ | (*list category*) | $ |
| Investment Income2 | $ | (*list category*) | $ |
| Income from Youth Development Services3 | $ | (*list category*) | $ |
| Other/ Pass Through Funds4 | $ | Other/ Pass Through Funds | $ |
| **Total Funds Received** | **(B) $** | **Total Funds Disbursed** | **(C) $** |

1 Occasionally, the 4‑H Youth Development Educator may need to access a record of individual donations during the last fiscal year. In that instance, the 4‑H Youth Development Educator will contact you.

2 Investment income includes interest earned in a bank account or trust fund, or income from land or other property.

3 Income from providing youth development services only includes fees charged directly to participants for the ability to participate in programs, such as 4‑H camps. However, it does not include membership dues.

4 Other/Pass Through Funds includes fees collected for educational programs carried out by other groups. This money is collected from the member/family and then paid directly to the other group/organization

**Accounts Information**

***Attach*** *a copy of the bank statement ending June 30 or July 1 for each account held by the 4-H Club or Group that reflects the account balances for the end of the fiscal year.*

**Checking Account Information**

Account Name (exactly as it appears on the bank statement) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Name and Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other Account Information, i.e. savings (if applicable)** (add pages to this document if needed)

Account Name (as it appears on the bank statement) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Name and Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Account Authorization:** Please print the names of people authorized on any club/group accounts. It is strongly recommended that each account have two or three unrelated people authorized on all accounts. One youth and one adult are recommended. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does the 4-H Club or Group have:**

Assets in excess of projected expenditures for two years or $1,000, whichever is greater? ☐ Yes ☐ No

Own land or buildings? ☐ Yes ☐ No

Own other property or project equipment with value over $500 🞎 Yes 🞎 No

Please attach an inventory of any land, buildings, property or project equipment with a value of over $500; indicating value and where stored.

**Financial Report Completed By:**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 *Print 4-H Club or Group Treasurer Name* *4-H Club or Group Treasurer Signature Date*

 *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

  *Print 4-H Adult Volunteer Leader Name 4-H Adult Volunteer Leader Signature Date*

 (*if treasurer is under age 18*) (*if treasurer is under age 18*)

Upon dissolution, 4-H Clubs and Groups with assets must turn over all 4-H funds to a recognized 4-H Club or Group with approval of a County UW-Extension staff member responsible for oversight of the 4-H Youth Development program.

**Financial Review:**  All 4-H Chartered Clubs and Groups must have an annual financial review to review and verify all the financial accounts and activities and this Annual Financial Report. The financial review must be completed by an adult unrelated to the person who completed the report and who is not directly involved with the club or group finances. It is suggested that two people review the financial accounts, of which one can be a youth. At least, one adult financial reviewer signature is required. [Audit resources and tools](http://www.uwex.edu/ces/4h/clubs/money.cfm) are available to assist volunteers.

*“By signing below, I attest that I have reviewed the pertinent records relating to the above financial accounts, verified the information and believe that the balances shown are correct and I attest that am not related to the individual on the account(s) I have reviewed.”*

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

  *Print Reviewer Name Signature of Reviewer Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

  *Print Reviewer Name Signature of Reviewer Date*

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