Winning 4-H Plan Request Form

An Accommodation Plan for 4-H Members with Disabilities Taking 4-H Projects

This form must be completed by the member's parent/guardian, signed by the club advisor, and submitted to a Pike County educator by June 1st of each calendar year. Once approved and signed by the educator, a copy will be mailed to the 4-H member and this form MUST be attached to the member's project book and presented at project judging.

4-H Member's Name (first & last)		
Age (as of 1/1/current year)	Birth Date	Years in 4-H
Street Address		
City	State	ZIP
Parent/Guardian Name (first & last)		
Phone Number	Email	
Name of 4-H Club		
Name of 4-H Club Advisor(s)		
4-H Project(s) Member Is Taking This	s Year:	
Describe 4-H Member's Present Leve	el of Needs and Current Dia	gnosis:
Accommodations Being Requested to the advisor would need to know):	o Help Meet 4-H Member's I	Needs (include any special procedure
I agree to adhere to the accommodations information provided on this form with Exjudges. I understand that this information help my child with his/her 4-H project(s) a	ctension staff, 4-H volunteers; an will only be shared and used a	and Jr. Fair personnel, volunteers and as necessary to provide assistance to
Parent/Guardian Signature		Date
Club Advisor Signature		Date
Pike County Educator Signature		 Date



