



New State Level 4-H Event Proposal Guidelines

(This form is for 4-H volunteers proposing a state level 4-H event)

State level UConn 4-H events provide a wonderful learning opportunity for 4-H youth beyond the club or local level. Many factors must be taken into consideration when deciding on the need for a statewide 4-H event. These may include level of interest, location, finances, safety considerations, etc. For this reason, a proposal is required.

Definitions

County level event – This type of 4-H event is organized and implemented locally for in-county youth; approval is needed from the local 4-H educator or coordinator.

County level open to statewide participation – This type of 4-H event is organized locally but open to participation by youth throughout the state; approval is needed from local 4-H educator or coordinator.

State level event – This type of 4-H event is organized and implemented at the state level for all UConn 4-H members when sufficient demand across multiple counties exists; state level events proposed by volunteers must complete the state level proposal process and receive approval from the 4-H team.

Successful experience hosting a county level event open to youth statewide is strongly encouraged prior to requesting approval for a new state level event, in part to demonstrate a sufficient level of interest from youth across Connecticut. This can be planned and implemented with the approval and assistance of county level 4-H faculty/staff and does not require the completion of this form.

Directions

This form must be submitted at least 6 months prior to the tentative date of the proposed event to provide sufficient time for the 4-H team to review the proposal; allow for any revisions; assess compliance with university policies (e.g., finances, insurance, rental facility agreements, ADA, IACUC); recruit event personnel; fundraise; and effectively market the event.

No proposed event may take any actions other than holding dates to reserve a facility (if that may be done without financial penalty) prior to approval. The following process will be used to evaluate state level 4-H event proposals:

- Submit completed proposal form to the State 4-H Office at 4-H@uconn.edu
- Within 10 business days of receiving the form, the State 4-H Coordinator will distribute the proposal for review using the State 4-H Event Request assessment form to the 4-H team which consists of the 4-H staff and faculty who manage the county 4-H programs across the state.
- The proposal will be reviewed and discussed during the next scheduled in-person monthly meeting by the UConn 4-H team when feasible; monthly meetings typically are not held in the summer. The State 4-H

Program Leader will communicate the decision on behalf of the 4-H team; it's anticipated that this will be within 60 days in most cases. The decision may include modifications to the proposed event; the primary contact must re-submit the form with modifications addressed *and* receive final approval prior to moving forward with event planning. The proposal form with final decision and State 4-H Program Leader signature and date will be returned to the primary contact for the proposed state 4-H event.

- If the request is not approved, the primary contact may re-submit the revised form, and an explanation of changes made to the proposal based on the 4-H team's feedback. Resubmission must be within 60 days of receiving the final decision; after that, a new proposal must be submitted.

New State Level 4-H Event Proposal

Title of Proposed event: _____

Please describe the proposed event in 250 words or less (overall summary of the event).

Please describe the history of the proposed event in 250 words or less, if this event has been held previously as a county-level event or county-level event open to statewide participation.

What are the expected benefits for the participants?

Proposal date and time of event: _____

Name and Contact Information of the primary contact for the planning committee:

Name: _____

Address: _____

Email: _____

Phone: _____ Cell: _____

For additional participants, please attach contact information on a separate sheet.

Project Information

Applicants should contact the State 4-H Program Coordinator at [e-mail] to obtain the project enrollment information needed to complete this section.

Is the proposed event focused on a project area? _____ Yes _____ No If yes, what project area: _____

How many counties in the state have youth participating in the designated project area? _____

How many 4-H members statewide are enrolled in this project area? _____

Is this event recurring? ____ Yes ____ No

If yes: How often will it be repeated? _____

Participant and Volunteer Information

Describe the target audience, including age level: _____

How many youth/adults are expected to participate in this event? ____ Youth ____ Adults

Is this event open to youth/adults beyond UConn 4-H ____ Yes ____ No

How many people will be needed to implement this event:

4-H faculty and staff:

Adult volunteers:

Youth volunteers:

What leadership roles will youth play in planning, implementing, evaluating and fundraising for this event?

Location/Safety

Location of event: _____

Reason for location proposed? _____

Are facilities proposed ADA compliant? ____ Yes ____ No ____ I don't know

Does this location require a Certificate of Insurance (COI)?

Does this location require a contract?

Will food be served at this event? ____ Yes ____ No

If yes, what food safety precautions will be in place? _____

Does this event involve animals? ____ Yes ____ No

If animals are involved in this event, how will animal health be maintained? _____

If the event will include animals and will be held at a UConn campus or University owned Extension office, adherence to UConn [IACUC \(Institutional Animal Care and Use Committee\) policies](#) may be required.

Any events proposing use of UConn Facilities must have agreement from a UConn employee to serve as the point of contact for the event.

What other safety precautions will be taken? (Keep in mind specific needs for this particular event)

How will appropriate youth supervision be provided, e.g. parent/guardian attendance required, drop off, pick up, etc. _____

Financial Information

On a separate sheet, please include a detailed budget for this event including expenses, income, and in-kind support (e.g., registration costs, travel, meals for participants).

What is the registration cost per participant? _____

Will the registration fee cover all anticipated expenses? _____ Yes _____ No

If no, how will the program be funded? _____

Describe how funding will be sustained beyond the first year _____

Who is accepting fiduciary responsibility for the event (i.e., collecting registration, ordering supplies, awards, paying expenses)? _____

If there are proceeds from the event, what are the plans for them? _____

Will there be fundraisers at the event? If so, please describe. _____

Will scholarships and/or financial aid be available for participants? If so, please describe. _____

Evaluation

What will participants learn at this event as it relates to youth development and educational outcomes and how will this event be evaluated to determine what participants learn as it relates to youth development and educational outcomes? _____

Who is responsible for evaluating the event? _____

Marketing and Visibility

How and when will the event be publicized? _____

How will donors be recognized? _____

Competitive Events

Is the proposed event competitive? ____ Yes ____ No

Is the proposed event intended to prepare or select youth for a regional or national competitive event? Please explain. _____

How will judges be selected? _____

How will judging criteria be made available to the participants in advance of the event? _____

How will youth receive feedback on their performance? _____

What type of recognition will be given to participants?

I understand pending approval of this proposal that I will need to work with a 4-H faculty/staff member to organize this event in alignment with 4-H policies and procedures. The UConn 4-H team will determine who will assume responsibility for the event if approved.

Name: _____
Primary Contact for the Event

Signature: _____
Primary Contact for the Event

Date: _____

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