



Texas 4-H and FFA Livestock Program Ethics Policy
Rule #3 Approval Form

Rule #3 of the Texas 4-H and FFA Livestock Program Ethics Policy states that exhibitors and immediate family/guardians are responsible for providing the primary and continuous daily care of livestock projects throughout the validation period. However, there are certain instances when the livestock may be outside of the direct care of the livestock exhibitor, their family, or their supervising County Extension Agent/Agriculture Science Teacher. These instances and the third-party providing care must be approved as noted in Rule #3. This form is to serve as an approval process for state validated livestock projects requesting to be outside of the care of the above listed parties for certain livestock management practices. For more information about Rule #3 or if this form is applicable for your situation, please review the Texas 4-H and FFA Livestock Program Ethics Policy: www.texasyouthlivestock.com.

This form must be signed by all parties listed below. Submission of request *does not* ensure the request will be approved. Please know you may not relocate livestock until you have received full approval from your county-level state livestock validation committee. State validated livestock projects outside of the direct care of the exhibitor, family member, or CEA/AST will result in disqualification as outlined in Rule #3. The supervisor should use realistic and reasonable measures for length of time the animal will be outside of the direct care of the exhibitor family in an effort to uphold the integrity of daily care and life skill development. For requests not listed in the drop-down list below, please contact the Species-Specific State Validation Chairperson. Local validation committees may not provide approval on out-of-state requests; out-of-state requests may only be approved by the Species-Specific State Validation Chairperson.

Steps for completing this form:

1. Livestock exhibitor family is responsible for initiating form, completing all information, and obtaining signatures on the bottom left side of this page.
2. The exhibitor family should send this form to the supervising CEA/AST for approval signature.
3. If the CEA/AST approves of the request, they send the form to the county-level state validation committee for full approval.
4. If the county-level state validation committee approves, the validation chairperson should indicate in the check box at the bottom of this page and sign as proof of the committee approval. If the committee denies the request, the chairperson should indicate in the appropriate check box below, sign, and email this form to the species-specific state validation chairperson. The exhibitor family should be notified of the committee approval or denial.

The following state validated livestock projects are requesting to be outside of the direct daily care of the livestock exhibitor or their family members. Please fill in the information below:

Name of Exhibitor(s): _____
Species: _____
State Validation Tag or UIN Numbers: _____
Reason for Livestock Leaving Direct Care of Exhibitor/Family: _____
Name of Third-Party Providing Care of Livestock: _____
Phone Number of Third-Party Providing Care of Livestock: _____
Physical Address Requested for the Livestock at Third Party: _____
Date Livestock Will Depart: _____
Date Livestock Will Return: _____

Signatures to Obtain Before Seeking Approval

1. Exhibitor(s): _____ Date: _____
2. Parent or Guardian: _____ Date: _____
3. Third-Party Providing Care of Livestock: _____ Date: _____

(By signing this form, you authorize the Local and State Validation Committees, State Validation Compliance Team members, and any other designated representatives to inspect any state validated livestock projects on premises you own, lease, or control at any time with or without prior notice.)

Signatures Needed for Approval

1. Supervising County Extension Agent or Agricultural Science Teacher: _____ Date: _____
(Signatures of #1 and #2 must be different individuals)
2. County-Level State Validation Chairperson: _____ Date: _____
(Chair signature verifies *majority* vote of the *committee* approval)

Approve Deny