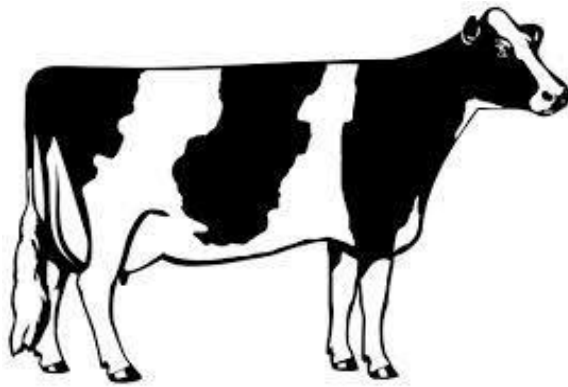


**2026 - 2027**  
TREASURE VALLEY  
DAIRY  
REPLACEMENT  
HEIFER PROJECT  
APPLICATION  
PACKET



# Treasure Valley Dairy Replacement Heifer Project

The Treasure Valley Dairy Replacement Heifer Project is open to participants from Ada, Canyon, Gem, Payette, Washington, Valley, and Owyhee counties. The purpose of the program is to increase knowledge and interest in the dairy industry, as well as enhance life skills among youth in the Treasure Valley.

Youth go through an application process in which they must understand, and agree to the rules and guidelines of the project. They purchase a heifer calf that has been provided by an area dairy producer to the TVDRHP program.

Program participants will halter-break, feed, and manage their heifer as described in the project guidelines for approximately 16 months. During this period of ownership, youth have an opportunity to develop skills in financing, budgeting, record keeping, nutritional management, reproductive management, selection, and showmanship of dairy animals.

There are numerous clinics, tours, and workshops available throughout the year for participants. In addition, farm visits are conducted by committee members to monitor progress and offer useful advice.

Finally, heifers will be sold as two-year old bred or “springer” heifers. The sale is scheduled to occur at the Western Idaho Fair in August.

For more information on the program contact the Treasure Valley Dairy Replacement Heifer Program at [treasurevalleydairy@gmail.com](mailto:treasurevalleydairy@gmail.com).

The University of Idaho is an equal-opportunity employer and educational institution. We offer our programs to persons regardless of race, color, national origin, sex, gender, religion, age, sexual orientation, disability, and reprisal or retaliation for prior civil rights activity.

Persons with disabilities have the right to request and receive reasonable accommodations. Each participant must be evaluated individually, assessing whether they are qualified for the event and whether they would be able to participate in the event with or without accommodation. So long as the participant meets essential requirements of the activity, participation should be welcomed. Please complete this [form](#) to assist in evaluating the reasonable accommodation request at least two weeks prior to the event. Accommodation applications cannot be approved without supporting documentation. Submit this electronic request form by sending the application and documentation to Center for Disability Access and Resources 875 Perimeter Drive Moscow, ID 83844-4257 [cdar@uidaho.edu](mailto:cdar@uidaho.edu) Phone 208-885-6307, Fax 208-885-9404

**Accomidations Link:** <https://content-hub.uidaho.edu/api/public/content/24dcb309ed5544e9a662bd870bd638dc?v=b54ea882>

Individuals with limited English skills must have meaningful access to our programs. If you need this program in a language other than English, contact Cheyanne Fisher at [cheyanne@uidaho.edu](mailto:cheyanne@uidaho.edu) at least two weeks prior to the event. If we cannot provide an interpreter, translation services will be provided via Google Translate.

# Treasure Valley Dairy Replacement Heifer Project

## Contact Information

*\*Please print legibly (in black or blue ink) or type*

### *Participant:*

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Communication Method:  
☐ Email ☐ Facebook ☐ Text Message ☐ Phone Call

### *Parent/Guardian:*

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Communication Method:  
☐ Email ☐ Facebook ☐ Text Message ☐ Phone Call

### *Parent/Guardian:*

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Communication Method:  
☐ Email ☐ Facebook ☐ Text Message ☐ Phone Call

### *Leader/Advisor:*

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Communication Method:  
☐ Email ☐ Facebook ☐ Text Message ☐ Phone Call

### *Other/In Case of Emergency:*

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_  
Preferred Communication Method:  
☐ Email ☐ Facebook ☐ Text Message ☐ Phone Call

# Treasure Valley Dairy Replacement Heifer Project

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Name of 4-H Group or FFA Chapter \_\_\_\_\_  
Age (as of Jan. 1<sup>st</sup>) \_\_\_\_\_ Grade in School \_\_\_\_\_  
Breed Preference: Holstein \_\_\_\_\_ Jersey \_\_\_\_\_ Crossbred \_\_\_\_\_  
I will be using a Calf Scramble Certificate to purchase my heifer \_\_\_\_\_

Please read and initial the following guidelines stating that you agree to do the following if given the opportunity to raise a heifer.

- \_\_\_ To follow all rules and guidelines set by the Treasure Valley Dairy Replacement Heifer Committee. Policy disputes shall be submitted to this committee for review as described in the rules and guidelines.
- \_\_\_ Attend program orientation, Selection Day and other educational events such as Meridian Dairy Days in June and the Reproduction Workshop in November. These activities are **mandatory** unless other arrangements are made with the Committee. Meridian Dairy Days show is **mandatory both** years of ownership. These activities are mandatory unless other arrangements are made with the committee.
- \_\_\_ Feed and care for heifer, and exhibit and show as either a 4-H or FFA member at your county fair **OR** the Western Idaho Fair. So that you won't have to attend two fairs each year, your county fair is optional in 2027.
- \_\_\_ Agree to pursue and bring my own buyers to the Western Idaho Fair in August of 2027.
- \_\_\_ *"I agree to exhibit the heifer at the Western Idaho Fair in August of 2027 to be eligible to sell in the special project sale held there."*
- \_\_\_ Heifer will be bred following the guidelines set by the committee. First service will be approximately December 1, 2026. Artificial insemination to the same breed is required for a minimum of **first three services**. Participating dairymen may submit a special breeding request.
- \_\_\_ Submit updates on heifer growth to the Extension Office in June and September of 2026, and February and May of 2027.
- \_\_\_ Provide information on the heifer for the sale book by **July 01, 2027** to [treasurevalleydairy@gmail.com](mailto:treasurevalleydairy@gmail.com).
- \_\_\_ *If problems arise, I will immediately contact a committee member, my mentor, my 4-H Leader/FFA Advisor.*
- \_\_\_ If the project cannot be completed, I agree to sell my heifer at market price to another 4-H or FFA member who will continue the project, or give the breeder the opportunity to buy the heifer back.
- \_\_\_ *A 5% commission on the heifer sale price will be assessed to each seller to cover sale and project expenses.*
- \_\_\_ All animals must be insured against death loss with the Treasure Valley Dairy Replacement Heifer Project. Cost is \$100 for the duration of the project. Details of the policy will be available at program orientation. Other animal coverage may be arranged with the approval of the Committee.
- \_\_\_ I am enclosing a **\$25.00 deposit**, which will be applied to the purchase price of the animal. The deposit will be refunded if the applicant is not accepted into the program. ***Make checks payable to Treasure Valley Dairy Replacement Heifer Project.***
- \_\_\_ I will notify the heifer committee if my 4-H club and/or FFA chapter changes during the duration of the project.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of 4-H or FFA member.

As legal guardian of the above member, I agree that he/she may enter into the above contract and will give him/her guidance and counsel.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian.

**Return this application by  
February 28, 2026 to:**

Canyon County Extension Office 501 Main Street, Caldwell, ID 83605  
or [treasurevalleydairy@gmail.com](mailto:treasurevalleydairy@gmail.com)

# Treasure Valley Dairy Replacement Heifer Project

Please complete this page **only** if you are seeking a new challenge and have been in this program for more than 3 years.

Name: \_\_\_\_\_

I am applying for the advanced Treasure Valley Dairy Replacement Heifer Project:

- ☐ A dairyman will be selected for me and I will go pick my heifer from them.

This program is for Treasure Valley Dairy Replacement Heifer Program participants who have been in the program for at least 3 years. This program has been created to challenge members to become more acquainted with the local dairymen and have a bigger challenge in selecting your project heifer from a larger group of heifers.

After acceptance into the Advanced Program, you will be notified who your dairyman is. You will need to contact your dairymen and get a heifer that was born between September 15 and November 15 of the previous year. You will need to find out what location you will be meeting them at to pick your heifer and set up a date and time to do so. This date must be before Selection Day as you will be required to come to Selection Day with your heifer. When you pick up your heifer you will be required to obtain all documents necessary on your heifer for the program.

On Selection Day you will pay for your heifer after her weight is determined and have your heifer checked by the veterinarian.

On a separate piece of paper, please answer the following questions.

1. Why do you think you are qualified to be a part of the Advanced Treasure Valley Dairy Replacement Heifer Program?
2. If you are selected to participate in the Advanced Program, how do you think it will help improve your skills as a dairy heifer owner?

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of 4-H/FFA member

# Treasure Valley Dairy Replacement Heifer Project

Name \_\_\_\_\_

Do you have an adult (dairy producer, leader, friend) you would like to have as a secondary mentor? If so, list the name, address, phone number and email here:

Write a brief essay (minimum of three paragraphs) about why you want to participate in the Treasure Valley Dairy Replacement Heifer Project. Additional sheets may be attached. What do you hope to learn while you are in this project? \*Please print legibly (black or blue ink) or type

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Date \_\_\_\_\_

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Signature of 4-H/FFA Member.

# Treasure Valley Dairy Replacement Heifer Project

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Name of 4-H Group or FFA Chapter \_\_\_\_\_

Submit this form to your 4-H leader or FFA advisor and ask them to write a recommendation for you. Additional sheets may be attached. Have that person submit it separately to the Canyon County Extension Office (501 Main Street, Caldwell ID, 83605) or [treasurevalleydairy@gmail.com](mailto:treasurevalleydairy@gmail.com) by **February 28, 2026**.

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Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

Preferred Communication Method:

☐ Email

☐ Facebook

☐ Text Message

☐ Phone Call

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of 4-H Leader or FFA Advisor

# Treasure Valley Dairy Replacement Heifer Project

Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Name of 4-H Group or FFA Chapter \_\_\_\_\_

Submit this form to an individual other than parents, leaders or advisors and ask them to write a recommendation for you. Additional sheets may be attached. Have that person submit it separately to the Canyon County Extension Office (501 Main Street, Caldwell ID, 83605) or [treasurevalleydairy@gmail.com](mailto:treasurevalleydairy@gmail.com) by **February 28, 2026.**

Name: \_\_\_\_\_ Preferred Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: Cell (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_ Other: (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

Preferred Communication Method:

☐ Email

☐ Facebook

☐ Text Message

☐ Phone Call

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of 4-H Leader or FFA Advisor



# Treasure Valley Dairy Replacement Heifer Project

Please complete this page **only** if you are seeking financial assistance to purchase a heifer.

Name: \_\_\_\_\_

I am applying for the:

- ☐ Scholarship covering the full purchase price of the heifer
- ☐ Interest free \$500 loan to be repaid after the sale of my heifer

For the past several summers, a group of individuals separate from the TVDRHP Committee has held a golf scramble to raise money for the TVDRHP program. The goal of this group is to raise money to help kids participate in the project who otherwise could not participate due to the financial burden. In 2026, there will be up to five scholarships, depending on participation and market prices to be used toward the purchase of a heifer. Scholarships are awarded **one** time only per participant.

The TVDRHP Committee is offering a second financial assistance option in the form of a \$500 loan to be repaid without interest when the heifer is sold in August 2027. First preference will be given to first time applicants. Returning applicants may apply.

All applicants will need to complete the attached balance sheet and projected budget to be considered for financial assistance.

Selection of recipients will be based on your answers to: the questions on this page, your essay question on page five of the application, completeness of balance sheet and projected budget, and the recommendations. Please take your time and complete the application to the best of your ability!

On a separate piece of paper, please answer the following questions.

1. Please explain why you need the scholarship or interest free loan and where the rest of the money will come from to purchase and care for the heifer? You may use a balance sheet and projected budget as examples for your financial assistance request.
2. If you are selected to participate in the program, how would you help promote the dairy industry in Idaho?
3. How would you contribute to the TVDRHP beyond participation in the program?

If I am selected by the Heifer Committee to receive an interest free loan to assist in purchasing my heifer, I agree that \$500 will be taken out of my sale check in August 2027 to repay the loan.

Date \_\_\_\_\_

\_\_\_\_\_  
signature of 4-H or FFA member

## ***Treasure Valley Dairy Replacement Heifer Project***

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### **Insurance**

The Treasure Valley Dairy Replacement Heifer Project will manage an insurance fund to insure animals against death loss. Premiums are \$100.00 per animal insured. Payout in the event of the death of the heifer will be fair market value as determined by local dairy sales at the time of death.

Total payouts can never exceed the insurance fund total. In the event that claims are made totaling more than the insurance fund contains, the fund will be split equally among those making a claim. Payout will not occur until after the heifer sale at the Western Idaho Fair for that group of heifers.

If there are no claims used by participants of the 2026-2027 group, \$50.00 of the premium will be refunded to each participant after the heifer sale.

No payout will be made in the event of death caused by negligence.

\_\_\_\_\_  
Project participant signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature

## ***Media Release Form***

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The Treasure Valley Dairy Replacement Heifer Committee has my permission to use my or my child's image (photographs and/or video) publically to encourage Idaho students to join and participate in the Treasure Valley Dairy Replacement Heifer Project. I understand that the images may be used in print publications, online publications, websites and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Please **initial** the paragraph below which is applicable to your present situation.

\_\_\_\_\_ - I am 18 years of age or older and I am competent to contract my own name.

\_\_\_\_\_ - I am the parent or legal guardian of the below named child.

If you have any questions please contact [treasurevalley@gmail.com](mailto:treasurevalley@gmail.com) or call Justin Nessbitt at 208-991-8595

Youth participant name (please print): \_\_\_\_\_

Name of parent or legal guardian (please print): \_\_\_\_\_

Signature of parent or legal guardian: \_\_\_\_\_

Date: \_\_\_\_\_

# **Treasure Valley Dairy Replacement Heifer Project**

## **RULES AND GUIDELINES**

### **I. COMMITTEE**

- A. The committee will be made up of dairy producers, extension educators, 4-H dairy leaders, FFA advisors, industry representatives and other interested persons.
- B. The responsibilities of the committee include:
  - 1. Meeting together as needed to discuss the program and its policies.
  - 2. Establishing policies for the program.
  - 3. Assisting with activities supporting the program.
  - 4. Securing calves for the program from dairy producers.
  - 5. Setting price at which participants will purchase heifers.
  - 6. Updating all application materials.
  - 7. Planning educational activities.
  - 8. Screening applicants to determine final eligibility.
  - 9. Gathering information for and printing sale book.
  - 10. Securing a floor price.
  - 11. Making arrangements for a facility for the sale.
  - 12. Securing an auctioneer.
  - 13. Determining rules and guidelines for sale procedure.
  - 14. Serve as a mentor for participants as needed.

### **II. REQUIREMENTS FOR CALF PRIOR TO PURCHASE**

- A. Dams shall be 100% of herd average and have no major faults.
- B. All attempts will be made to select heifers who's sires are a registered, proven A.I. stud.
- C. All attempts will be made that calves shall have been born between September 15 and November 15, 2025.
- D. Calf should be structurally sound, in good health, and have good dairy character.
- E. Crossbred heifers should be all dairy breeds with no beef influence.
- F. Breeders shall be on milk test and supply the following information:
  - 1. Name and address
  - 2. Calf birth date
  - 3. Calf breed
  - 4. Registration of calf (if applicable)
  - 5. Sire of calf
  - 6. Ear tattoo recorded if calf has already been vaccinated
  - 7. Dam of calf
  - 8. Complete lactation records of dam (days in milk, number times milked per day, pounds milk produced, pounds fat produced, test for lactation)

- G. All heifers will be Brucellosis vaccinated between **three (3)** and **twelve (12)** months of age if not already done by the producer. The committee will arrange to give to the tattoos and dehorn. The tattoo should be legible in natural light. Check tattoos one to two months following purchase of the heifer to insure legibility. If the tattoo is not legible, contact the veterinarian who vaccinated the calf. Sometimes the tattoo can be reapplied but not if you wait too long.

### III. REQUIREMENTS OF PARTICIPANTS

- A. Must be a currently enrolled 4-H or FFA member. Seniors in high school that will be the age of 18 at the time of the sale will be eligible, if present for the duration of the project and to sell their heifer. Juniors in high school are also eligible, if they will be present for the duration of the project and to sell their heifer.
1. **REMINDER: All 4-H participants need to enroll into their own counties dairy project. Participating in the TVDRHP does not automatically enroll you into the dairy project.**
- B. Have adequate facilities and feed for raising the heifer for 16 months.
- C. Have parent and leader/advisor support.
- D. Qualified applicants who have never had a project heifer and former participants not currently owning a heifer in the project will be given first priority.
- E. Acceptance by the committee does not guarantee that you will receive a heifer. The committee will make every possible effort to secure heifers for the project members. In the event that the committee is unable to secure a sufficient quantity of heifers, some acceptable applicants might be dropped. (This hasn't happened yet, but be aware that the possibility does exist.)
- F. In the case that there are a limited number of heifers returning participants may not receive a heifer. *The committee may grant exceptions to this due to circumstance.* The purpose of this is to allow all youth who would like to participate in the project a chance to do so.

### PURCHASING OF CALVES

- G. Selection of a heifer will be made at a central location in April 2026 using a random drawing process. Three heifers will be randomly selected to be in the sale ring. Then a youth will be randomly selected to pick one heifer, and they will exit the sale ring. Another heifer and youth will be randomly selected and put in the ring, and the process repeated until every participant has a heifer.
- H. Buyers agree to pay sellers the sale price, which will be the present market price and set by the committee, on Selection Day and have arrangements made to take the calf home that day. Price is determined by the committee and is based on current market conditions.
- I. Calves are not guaranteed to be registered.
- J. Each participant can purchase only one heifer each year as part of the project. Youth can participate in consecutive years.
- K. The committee will make every effort to accommodate the breed preference of the participant. It can be hard to find enough Jersey heifers for all requests. Preference will be given to young or first-time participants and participants who have not requested or received a Jersey in the past. Other participants will be given the opportunity to purchase a Holstein heifer.

#### IV. RESPONSIBILITY OF PARTICIPANT

- A. Remove extra teats.
- B. Provide adequate care and feeding of the heifer to ensure health and proper weight for breeding. Large breeds should weigh approximately 800-900 pounds depending on frame size of the animal. Small breeds should weigh approximately 600-700 pounds depending on frame size of the animal. Heifers who do not make proper weight may not get bred due to size.
- C. Place magnet in heifer first year.
- D. Heifer will be bred following the guidelines set by the committee. First service will be approximately December 1, 2026. Artificial insemination to the same breed is required for a minimum of first three services, following that, a bull may be used after notifying the committee. If the producer has requested the animal be bred to a different breed it must be approved by the committee prior to breeding. Use of heat synchronization is your option. Heifers can be sent to a heifer raising operation in Parma for the breeding season. Mann's will pregnancy test at 40 and 60 days and notify the a committee member immediately of the results. Hauling the heifer directly to a veterinarian's office is much cheaper than a farm call. If breeding at home, pregnancy checks are your responsibility. Second pregnancy check needs to be done by or at the May clinic.
- E. A committee member and/or 4-H leader/FFA Advisor may visit in the early spring and/or late fall to check on the heifer. Have the checklist ready and be able to give an oral report about your heifer. These visits may occur both years of ownership. A written report on your heifer and her progress will be **required** by the end of June and September of 2026 and February, and May of 2027. This report will be forwarded to the dairyman and mentor. **All of the reports must be turned in to be eligible to sell.**
- F. Provide information on heifer, her dam, and service sire for sale book to the committee **by date set by committee** of sale year. The committee will supply an information form for you to fill out. *THE 2026-27 DEADLINE IS JULY 01, 2027.*
- G. Show heifer at your county fair **or** the Western Idaho Fair (WIF) first year of ownership (it is strongly encouraged you show your heifer at the WIF the first year as many of the producers and potential buyers of your heifer will be in attendance and it will be a good opportunity for them to see your heifer and inquire on her progress). Must show at WIF second year of ownership in order to sell. Your county fair in second year is optional. Attendance at the Meridian Dairy Show in June of both years is required. If not in attendance at either year's Meridian Dairy Days show, all moneys from the Meridian Dairy Days board, if given, will be forfeited. Attendance at all other educational events sponsored by the committee is required.
- H. If the 4-H or FFA member is unable to continue raising the heifer, it may be turned over to another 4-H or FFA member with arrangements determined prior to the exchange for the sale price and/or division of profits. The committee must be notified **BEFORE** any exchange takes place.
- I. If problems arise, don't wait until the week before fair to notify the committee there is a problem. It is your responsibility to let the committee know immediately when problems arise.

- J. **Failure to comply with ANY rules in Section IV will void the contract and participants' right to sell their heifer in the Dairy Replacement Sale. The participant shall not be allowed to buy a heifer for one year.**

#### SELLING OF THE HEIFER

- K. All heifers will be sold at the TVDRHP sale held during the Western Idaho Fair (WIF) in the second year of ownership. Pregnancy check and ear tattoo confirmation will be required. You must exhibit your heifer at the WIF during the second year of ownership to be eligible to sell.
- L. Any heifer calving early due to accidental early breeding (i.e. neighbor's bull gets out) still must be sold in the sale with the new calf considered separate from the heifer and owned by the participant currently raising the animal. The owner has the option whether to include the calf in the sale or keep it. The committee shall be notified and will address each situation individually.
- M. Heifers will sell as determined by random drawing.
- N. The committee will handle all money.
- O. The producers of the TVDRHP who enroll heifers are very interested in buying their heifer to put back in the herd. Make every effort to make the producer proud.
- P. A 5% commission on the heifer sale price will be assessed to each seller to cover sale and project expenses.

#### V. WHAT TO DO IF YOU HAVE PROBLEMS

- A. If a heifer dies, participants have the option of taking ownership of a project heifer if available or collecting insurance money. This decision must be validated through the grievance policy process. All other situations will be considered by the committee using the following guidelines.
- B. Taking ownership of a project heifer due to death or no successful breeding, must be completed through the grievance process. All other situations will be considered by the committee using the following guidelines.
- C. The committee is responsible for final decisions regarding policy disputes.
- D. All grievances must be submitted in writing to the committee, including:
1. Name of complainant
  2. Statement of complaint
  3. Date of complaint
  4. Signature of 4-H Leader or FFA Advisor
- E. All grievances must be turned in to the Canyon County Extension Office no less than ten (10) days after the incident occurred.
- F. A committee meeting must be called within 14 days of the grievance. All committee members must be notified, and at least three members of the committee must be present to validate the decision.
- G. The committee decision will be returned to the complainant in writing within five (5) days after the meeting.
- H. Any committee member associated closely with the grievance, compromising their position, should abstain from voting.
- I. All committee decisions are final.

# Treasure Valley Dairy Replacement Heifer Project

## Timetable of Responsibilities

ACTIVITY	TIME PAST BIRTH	DUE DATE	DATE COMPLETED	☐ PUT INTO RECORDS
<b>First Year</b>				
1. Dehorn, remove extra teats	1-6 mo.	April		
2. Deworm, watch for lice, warts, ringworm	3 months +	April		
3. Vaccinate with an 8-way Clostridium with Hemophilus & a 9-way that includes IBR, PI3, BVD, BRSV, and Lepto.	6 mo.	April		
4. Vaccinate for Brucellosis	3-12 mo.	April		
5. Record ear tattoo # _____	3-6 mo.	April		
6. Check animal weight – Record Animal Weight _____lbs.	6 mo.	April		
7. Check ear tattoo for readability	6 mo.	May		
8. Attend and exhibit at the Meridian Dairy Show	8 - 10 mo.	June		
9. Attend local county fair or Western Idaho Fair	10-13 mo.	July/Aug.		
<b>Second Year</b>				
10. Give a booster (modified live preferred) of the same vaccines recommended in the first year.	12 mo.	By Nov. 15		
11. Weight of heifer approximately 800- 900 lbs (large breeds) 600- 700 (small breeds)- Record Animal Weight _____lbs.		By Nov. 15		
12. Heifer given magnet (can give first year)	12 mo.	By Nov. 15		
13. Watch heifer for heat	13-15 mo.	Sept. - Nov.		
14. Complete first service (approximately December 1)		December		
15. Pregnancy check between 40 and 60 days		Jan- March		
16. Pregnancy test at approximately 4 months into gestation		April - June		
17. Trim feet if needed		May- June		
18. Attend and exhibit at the Meridian Dairy Days show		June		
19. Heifer Sales Book information to Extension Office		June 15		



20. Mandatory attendance at Western Idaho Fair in order to sell at the sale		August		
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## Treasure Valley Dairy Replacement Heifer Project

### Example Budget

	<u>Unit</u>	<u>\$/Unit</u>	<u>Number of Units/head</u>	<u>Cost</u>	<u>Income</u>
1. Gross Receipts					
Replacement Heifer (based on 2018 prices, w/out add ons)	Head	\$3314.47	1 Head		\$2,292.86
2. Costs					
Initial Heifer Value (based on 2019 figures) (500 pounds @ \$1.00/pound)	Head	\$1050.00	1 Head	\$1050.00	
Feeds					
Roughages (8,000 lbs.)	Ton	\$200/ton	4.00 Ton	\$800.00	
Concentrates (1,500 lbs) <sup>1</sup>	Ton	\$500/ton	.75 Ton	\$450.00	
Yardage (during breeding)	Days	\$3.50	90 days	\$112.50	
Drugs/Veterinary <sup>2</sup>	Head	Varied	1 Head	\$75.00	
Bedding/Housing	Head	\$70.00	1 Head	\$ 70.00	
Breeding <sup>3</sup>	Head	\$30.00	1 Head	\$30.00	
Supplies <sup>4</sup>	Head	Varied	1 Head	\$90.00	
Insurance Fee	Head	\$100.00	1 Head	\$100.00	
Interest on Heifer <sup>5</sup>	Dollars	.02875%	\$1050.00	\$40.15	
Sale Fee	Dollars	\$129.40	1 Head	\$129.40	
3. Total Costs				\$2947.05	- \$3314.47
4 Returns <sup>6</sup>					= 367.42

<sup>1</sup> Cost may vary depending on the market and whether purchased in bulk or individual sacks. This price reflects individual sacks which are more expensive. (30 bags/50 lbs each x \$15 = \$450.00)

<sup>2</sup> Veterinary home calls are more costly than hauling a heifer to the clinic. This cost reflects taking the heifer to the clinic for preg checks.

<sup>3</sup> Semen cost can vary greatly.

<sup>4</sup> Supplies during the first year of the dairy project may be more expensive if you don't have supplies like halters and clippers.

<sup>5</sup> Interest = (.02875 x \$1050.00 x 1.33 years = \$40.15)

<sup>6</sup> **Not all costs listed here will apply to every animal.** However this budget reflects what could be expected during the course of the program. **Participants can increase their receipts through active marketing of their heifer and add-on donations.**

# Treasure Valley Dairy Replacement Heifer Project

## Committee/Resource List

FNAME	LNAME		ADDRESS	CITY	STATE	ZIP	PHONE
Rhiannon	Blum	Committee Member	13198 Purple Sage Road	Caldwell	ID	83607	208-869-7142
Corey	Edwards	Committee Member	5220 W Amity Rd.	Nampa	ID	83687	208-573-5713
Susi	Larrocea-Phillips	Committee Member	7855 North Star Road	Meridian	ID	83646	208-871-5766
Megan	Bennett	Committee Member	22787 Parkinson Rd.	Grand View	ID	83624	208-965-3416
Justin	Nesbitt	Committee Member	2405 Scarlet Rd.	Boise	ID	83706	208-991-8595
Gwen	Murray Clark	Committee Member	5736 W. Pheasant Circle	Boise	ID	83714	309-696-8392
Maricela	Garcia	Committee Member	7876 Southside Blvd.	Nampa	ID	83686	208-695-4463
Cheyenne	Myers	Committee Member	501 Main Street	Caldwell	ID	83605	208-459-6003
Tim and Debbie	Lowber	Committee Member	8276 Dearborne Rd.	Nampa	ID	83687	T: 208-880-7446 D: 208-272-0008
Corinne	Conley	Committee Member	3173 E. Green Meadows	Nampa	ID	83687	208-890-1242
Jordyn	Betterncourt	Committee Member					
Staci	Odette	Committee Member					