



4-H Scholarship Application

Stevens County 4-H Leaders' Council

Name: _____ Date: _____

Address: _____

Home Phone: _____ Parent's Work Phone: _____

Parent's Name: _____

Age: _____ Current Grade: _____

4-H Club: _____ Year in 4-H: _____

1. What 4-H event are you planning to attend? _____

2. Have you attended this event before? _____ If so, how many times? _____

3. Why are you interested in this opportunity? _____

4. What kinds of activities will you be participating in at this event? _____

5. What do you expect to learn or gain from going? _____

6. How will your opportunity contribute to the 4-H program in our county? _____

7. Please mark at least two of the opportunities you would be willing to share your learning experience with:

4-H Club(s)	_____	School	_____
Civic Groups	_____	Businesses	_____
4-H Leaders' Council	_____	4-H Ambassadors	_____
Sensational Saturday	_____	Other	_____

I understand that if I am unable to attend the event I receive a scholarship for I must notify the WSU Stevens County Extension office at 684-2588 as soon as possible. I also understand that if I am unable to receive a refund from the event I will reimburse Stevens County 4-H Leaders' Council the scholarship amount

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

4-H Office Use

Stevens County 4-H Leaders' Council and Agent Information

Date: _____ 4-H Scholarship Amount Granted: \$_____

County Council member (s) or agent contacted: _____

Authorized by: _____