

Crawford County 4-H & Extension Foundation Scholarship

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Completeness and neatness ensure your application will be reviewed properly.		Application must be received by April 15, 2022.		
SCHOLARSHIP AWARD GUIDELINES	The award of up to \$500 may be used for educational expenses during the first or second year of college or post- secondary vocational/technical school. The number of awards to be given out will be of the Foundation's discretion. The award is given without regard to race, color, creed, religion, gender, or disability.			
	While academics are important, the scholarship is based more on overall 4-H achievements and 4-H participation . The Selection Committee judges applications based on the above values. There will be no further investigation of the prospective students or their parents with respect to financial need or other personal matters.			
	Students must complete the entire <u>2022 application</u> and must signature Extension Foundation must receive the application by April 15 , 2			
ELIGIBLITY CRITERIA	The applicant must:			
CRITERIA	1. Be a high school senior or college freshman.			
	2. Have been an active member of the Crawford County 4-H Pr	ogram for 5 years or more.		
	 Plan to enroll (or have enrolled) in an accredited two- or fou school by the Fall 2022 semester. 	rr-year college, university, or vocational/technical		
APPLICANT INFORMATION	Last Name First			
	Mailing Address			
	City State Telephone () Parent's/Guardian's Nam			
		le		
	Current Grade: 🗌 High School Senior 🛛 College Freshman			
WORK EXPERIENCE	Are you employed: 🛛 Yes 🖾 No			
EXPERIENCE	Employer Name	Telephone ()		
4-H MEMBER	4-H Club(s) Leade	er(s)		
INFORMATION	Years in 4-H Last Year Active Offices Held in 4-H	H Club:		
	Years Served as Jr. Leader Offices Held in Jr Leaders	3:		
	State Fair Participation (# years): Livestock General	Work		
HIGH SCHOOL	School Name High School	ol Graduation Date: Month Year		
DATA	School Address			
	City State Zip Code	Telephone ()		
POST- SECONDARY	Name of post-secondary school you plan to attend. Use official so			
SCHOOL DATA	City			
		her, explain		
	Major or course of study: Expected colle			
	Degree sought: Bachelor Associate Certificate	e 🗌 Other		
	Have you been accepted: Yes No			

If space provided in any section is inadequate, you may attach one additional typed sheet. Attachments must follow the same format. Your name, address, and name of this scholarship program should be included on all attachments.

FUTURE Explain your career choice and your goals for the future.

COMMUNITY List all unpaid community activities in which you have participated during the last four years (e.g., 4-H, school, ACTIVITIES, church, clubs, sports, etc). Note all offices held, committee work, special awards, and honors. AWARDS AND Number HONORS Activity Special Awards, Honors Offices Held of Years 1. 2. 3. 4. 5. 6.

ATTAINING YOUR How will this scholarship help you attain your goals? GOALS

OBSTACLES, ACCOMPLISH-MENTS, & EXPERIENCES Tell us any obstacles you have overcome, accomplishments that make you especially proud, or a 4-H experience that has been especially important in your life.

4-H PROGRAMS

List any County, State, National, International 4-H programs, events, activities you have participated in, attended, or helped plan during your 4-H membership.

REFERENCES	List two persons not related to you (teacher, employer, minister, 4-H leader, etc.) who could provide a reference for you.		
	1. Name	Telephone()	
	2. Name	Telephone ()	
ANYTHING ELSE	Is there anything else you want the Selection Committee to know about you?		

APPLICATION SUBMISSION	The student is responsible for submitting all materials to the Crawford County 4-H & Extension Foundation on time. Applications may be mailed to the address below or delivered to the Crawford County University of Illinois Extension office by the due date. Incomplete applications will not be evaluated.		
	Mail to: 4-H & Extension Foundation PO Box 712	Application must be received by April 15, 2022. Please call the Extension Office at (618) 546-1549 if you have any questions.	
	Robinson, IL 62454		
CERTIFICATION	I acknowledge decisions of the Crawford County 4-H & Extension Foundation are final. I certify that I mee basic eligibility requirements of the program as described in the guidelines and that the information provide complete and accurate to the best of my knowledge.		
	Applicant's Signature	Date	