



Monroe County 4-H Event Scholarship



Sponsored by: Monroe County Extension & 4-H Education Foundation

Application for: _____
(name of conference, camp or other 4-H opportunity)

Cost of Event: \$ _____
(Scholarship will cover *up to* 50% of the event; participant will be responsible for the remainder.)

Name: _____ Grade: _____

Address: _____ County: _____

City, State, Zip: _____ Phone: _____

Parent/Guardian Name(s): _____

The completed application must be submitted to the Monroe Co. Extension Office at least one month prior to event (unless special circumstances prevent early submission).

Submit to:

University of Illinois Extension
901 Illinois Ave., P.O. Box 117, Waterloo, IL 62298
Fax: 618-939-7708
Attn: Kelly Brandt

*Please answer the following questions and attach to the applications (max. 2 pages):

1. List the 4-H Club(s) & club membership involvement in which you have been active.
2. List the number of years you have been a 4-H member.
3. Explain “why you would like to attend this 4-H event.”
4. Explain “how you plan to share/use the information from this 4-H event.”
5. If you participated in the event in a previous year, what interests you to attend again?

*In addition, one personal reference from must be completed by a 4-H Leader (see back).

I hereby certify that all of the above information is true and correct to the best of my knowledge.

Member Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Approved candidates will receive a scholarship following their participation in the 4-H event.



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PERSONAL REFERENCE PAGE

Please have one adult 4-H leader from your club complete this Personal Reference Form.

The reference may not be a relative of the applicant. The completed Personal Reference Form should not be attached to this application. It must be mailed directly to the University of Illinois Extension Office.

Name of Applicant: _____

Name of 4-H Conference, Camp or Opportunity: _____

Describe how you know and how long you have known the applicant:

Why do you believe the applicant should be awarded this scholarship: (Use additional sheet if needed.)

Your Name: _____ Phone: _____

Address: _____ City, State, Zip: _____

Signature: _____

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