



J. Miles & Maribel McGrew 4-H Memorial Scholarship

It is the intent of this scholarship to preserve the memory of Miles & Maribel McGrew and the values they lived by. Miles & Maribel raised eleven children of their own, all were 4-H members. They also took in another teen boy and raised him. They took an interest in children and the underprivileged of their local community and gave discounts to 4-Hers that purchased from one of their livestock sales. As they lived and worked on their grain, livestock and draft horse farm, they instilled the values of kindness, generosity, and hard work.

One scholarship will be awarded each year. If no scholarship is awarded, the funds will be added to the principle of the endowment.

Requirements:

- High school senior, who has been active in McDonough County 4-H for a minimum of 4 years.
- By the application deadline, have been accepted to post-secondary education. Examples include: university, community college, vocational program, etc.
- Submit a typed application
- With this application, individuals are asked to submit two letters of recommendation. Letters may be from a teacher, counselor, 4-H volunteer/staff person, employer or friend. Letters should NOT be from close relatives.
- Submit most recent school transcript with G.P.A.

Scoring Criteria:

• Achievements/Accomplishments	20 points	
• Community/School/Church	20 points	
• 4-H Activities/Leadership	20 points	Total Selection Points
• Financial Need	20 points	100
• Character/Personality	20 points	
- Moral Character		
- Industriousness & motivation		
- Mentoring, helping others		

Distribution of Scholarship Funds:

Scholarship funds will be sent directly to the winning individual, at the address included on this application. Once notified of selection, it will be the responsibility of the individual to provide proof of enrollment before funds will be released and payments made. This can be a copy of a class schedule, tuition bill, etc. Please mail or deliver completed application materials by April 1st, to:

**McDonough County Extension Office
3022 West Jackson
Macomb, IL 6145**



J. Miles & Maribel McGrew 4-H Memorial Scholarship Application

Name: _____

Address: _____

Parents/Guardians Names: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____

Name of 4-H Club(s): _____

University/School/Program planning to attend: _____

How many others of your immediate household will be attending a post-high school educational program during the same school year for which you are applying?

Number _____

Authorization and Release:

I understand that should I be selected as the winner of the scholarship as a result of this application, I will be asked to submit a photo and/or be photographed for inclusion in local newspapers, publications, McDonough County Extension Facebook page and/or website. I hereby authorize the McDonough County Extension Service to publish my picture, if I am selected a winner. (NOTE: if the applicant is under 18, a parent or guardian must sign,)

Applicant Signature: _____

Print Name: _____

Parent Signature (if under 18): _____

Date: _____

Scholarship Questions

Application Instructions: Applicants, please answer the following question to be considered for this scholarship. Answers must be typed in the format of your choice in the space provided.

1) Achievements/Accomplishments

Describe your most meaningful achievement and how it relates to your future goals. How have your experiences within 4-H helped you to achieve this success? Please limit response to the space allotted.

2) Involvement

Beyond 4-H, please highlight your school, religious and/or other community activities. Please limit your response to the space allotted.

3) 4-H Leadership

List 4-H Leadership roles and activities. This could include but is not limited to committees and offices held. Please provide the level of the participation behind each role (L=Local club, C=County, M=Multi-county, R=Regional, S=State, N=National, I=International. Please limited your response to the space allotted.

4) Character

Why do you feel that you should be awarded this scholarship? Please refer to selection criteria on page 1 to guide your response. Please limit response to the space allotted.

5) Financial Need

Since financial need is one of the criteria used to select the recipient, please supply the following information. The information is strictly confidential and will only be reviewed by the committee. This data is utilized to assist members of the committee in identifying specific needs of the individual applicant. It is very important that you complete this section, however you may choose whether to complete the column of percentages or include specific dollar amounts.

Please identify either the percent or specific dollar amount of your post-secondary education that each category will be responsible for. Remember, post-secondary education could include more than just hourly tuition costs.

	<u>Percent %</u>	<i>OR</i> <u>Dollar Amount \$\$</u>
Student		
Parents		
Scholarships		
Grants		
Gifts		
Loans		
*Other		
Total	100%	\$

*Please Describe:

Statement of Verification:

By signing below, I verify that the information provided in this application was completed to the best of my abilities and was the sole effort of myself, the applicant.

Applicant signature: _____ Date: _____