

Patti Jeanne Higgins 4-H Scholarship Instructions

Completed Application due on or before 3:30 PM March 15.

The scholarship shall be for one year, available to high school seniors or persons enrolled in the first year of college, university, technical or vocational school.

- Two (2) \$500 scholarships will be awarded each year.
- Applicant must be a resident of Mercer or Warren County.
- Applicant must have been actively involved in 4-H for a minimum of three (3) years.
- Preference will be given to applicants who are or were a member of the Alexis All-Star 4-H Club.
- Applicant may attend any college, university, technical or vocational school.
- Applicant is required to verify acceptance to or present enrollment at a college or university prior to receiving the grant.
- Applicant shall be required to submit a written application, which will be provided.
- The selection committee will make its decision in early May.

In addition to eligibility guidelines, the following will be considered in selecting recipients:

- Academic performance and honors
- Rank in class
- ACT score
- Financial need
- Character and personality: Consideration shall be given to maturity; industriousness and motivation; intellectual interest; moral character; and demonstrated leadership.

Scroll down to see the application and **DOWNLOAD** a copy to print and fill out.

If you need a hard copy, call the Mercer County Extension office at (309) 871-5032 (office hours are Tues. Wed. Thur. 8 am – 4 pm (closed 12 – 12:30 pm)

UPON COMPLETION OF THIS APPLICATION, MAIL the application form, transcripts and personal references to

Patti Jeanne Higgins 4-H Scholarship
c/o Mercer County Extension Office
910 13th Street,
Viola, IL 61486



PATTI JEANNE HIGGINS 4-H SCHOLARSHIP
APPLICATION GUIDELINES
Completed Application due on or before 3:30 PM on March 15.



- 1) The scholarship shall be for one year, available to high school seniors or persons enrolled in the first year of college, university, technical or vocational school.
- 2) Two (2) \$500 scholarships will be awarded each year.
- 3) Applicant must be a resident of Mercer or Warren County.
- 4) Applicant must have been actively involved in 4-H for a minimum of three (3) years.
- 5) Preference will be given to applicants who are or were a member of the Alexis All-Star 4-H Club.
- 6) Applicant may attend any college, university, technical or vocational school.
- 7) Applicant is required to verify acceptance to or present enrollment at a college or university prior to receiving the grant.
- 8) Applicant shall be required to submit a written application, which will be provided.
- 9) The selection committee will make its decision by May 1.

In addition to eligibility guidelines, the following will be considered in selecting recipients:

- 1) Scholarship Academic performance and honors
 Rank in class
 ACT score
- 2) Financial need
- 3) Character and personality: Consideration shall be given to maturity; industriousness and motivation; intellectual interest; moral character; and demonstrated leadership.

**UPON COMPLETION OF THIS APPLICATION, MAIL APPLICATION FORM,
TRANSCRIPTS AND PERSONAL REFERENCES TO:**

PATTI JEANNE HIGGINS 4-H SCHOLARSHIP
c/o Mercer County Extension Office
910 13th Street
Viola, IL 61486

Telephone: 309/871-5032

FAX: 309/871-5034

Application is also available on-line <https://extension.illinois.edu/hmrs/4-h-mercercounty>



PATTI JEANNE HIGGINS 4-H SCHOLARSHIP

APPLICATION

MERCER COUNTY EXTENSION OFFICE

910 13th Street

Viola, IL 61486



PLEASE TYPE OR PRINT NEATLY

DATE _____

SECTION 1. GENERAL INFORMATION

Name _____

Home Address _____

(Street/ Box #)

(Town & State)

(Zip Code)

Home County _____

Phone _____

(area code)

(number)

E-mail Address _____

Gender: male female

High School Attended _____

Graduation Date _____

College, University, Technical or Vocational School Accepted or Attending _____

What will be (or is) your major area of study? Please be specific. _____

Father's Full Name _____

Mother's Full Name _____

SECTION 2. ACADEMIC INFORMATION

What is your high school GPA? (Enclose Transcripts) _____

What is your high school class rank? _____

(your rank)

(# in graduating class)

What was your composite ACT score? _____

or SAT score? _____

What high school and/or college academic honors have you received? _____

SECTION 3. ACTIVITIES (attach an additional page, if necessary)

A. Identify the name of the 4-H Club that you are or were a member of: _____

List the years that you were a member of this 4-H Club: _____

List the officer positions you held in the 4-H Club, other positions of leadership and activities you participated in:

Officer/Leadership Position	Dates of Involvement	Activities

Briefly summarize your experience as a member of the 4-H Club: _____

B. List the activities in which you have participated in high school and/or college. Indicate offices held and positions of leadership you have held as well as any honors you have received based on your participation.

Activity	Leadership/Officer	Dates of Involvement

C. List church, civic or community activities.

D. What are your educational and professional goals and objectives.

SECTION 4. PERSONAL REFERENCES

Please have two adult 4-H leaders from your 4-H Club complete the enclosed Personal Reference forms. The **references may not be relatives of the applicant.** The completed Personal Reference forms shall not be attached to this application, but must be **mailed directly to the Scholarship Committee.**

Please list below the name and phone number of each personal reference:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

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

Student's signature _____ Date _____

Parent/Guardian's signature _____ Date _____

APPLICATION DEADLINE IS 3:30 PM on March 15.

Please return the completed application and a copy of your high school transcript to the scholarship committee at the following address:

Patti Jeanne Higgins 4-H Scholarship
c/o Mercer County Extension Office
910 13th Street
Viola, IL 61486



PATTI JEANNE HIGGINS SCHOLARSHIP
PERSONAL REFERENCE



Name of Scholarship Applicant: _____

1. Describe how you know the Applicant.

2. Describe the character traits of the applicant you have observed.

3. Describe why you believe the applicant should be awarded a **Patti Jeanne Higgins Scholarship**.

Signature: _____

Name (printed): _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Please return this completed form in a sealed envelope directly to the scholarship committee at the following address:

Patti Jeanne Higgins 4-H Scholarship
c/o Mercer County Extension Office
910 13th Street
Viola, IL 61486

**APPLICATION DEADLINE IS on or before
3:30 PM on March 15.**

Application is also available on-line



PERSONAL REFERENCE

Name of Scholarship Applicant: _____

1. Describe how you know the Applicant.

2. Describe the character traits of the applicant you have observed.

3. Describe why you believe the applicant should be awarded a **Patti Jeanne Higgins Scholarship**.

Please return this completed form in a sealed **envelope directly to the scholarship committee** at the following address:

Signature: _____

Name (printed): _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Patti Jeanne Higgins 4-H Scholarship
c/o Mercer County Extension Office
910 13th Street
Viola, IL 61486

APPLICATION DEADLINE IS 3:30 PM on March 15.

Application is also available on-line.