Email: hs@listserv.ksu.edu Scholarship Application

Application Date:		
Name:		
Address:		
City, State, Zip:		
Phone:	Email:	
Requirements:		
	Must be enrolled in Haskell Co	ounty 4-H for 4 consecutive years and a
	current club member.	
	Must have been enrolled in Le	eadership for at least 3 years.
	Never has been a recipient of	the Haskell County 4-H Council
	Scholarship	
	Must be a graduating senior in	n High School
Years enrolled in 4-H: Highest Achievement Pin Earned:		
Answer the follow	ing questions in essay form a	nd attach additional pages:
1. Why are you pursuing a college education? What school and area of study are you pursuing?		
2. How has 4-H impacted your life?		
3. Tell about 4-	H leadership that you initiated o	r organized for 4-H or your community.
• •	bmit a resume including school A and other important informa	ool, community and church activities, ation.
Signature of applic	Date:	

This scholarship will be paid upon presentation of first semester grades, and must be claimed within three semesters from the date awarded.

Please return completed application to the Haskell County Extension Office by April 1st.