

## BERRIEN COUNTY 4-H SCHOLARSHIP APPLICATION

This application is used for <u>BOTH</u> the Berrien County 4-H Alumni Scholarship and the Joseph Cerny & Evelyn Cerny Memorial Scholarship. Please fill out the below application regardless if you are applying for both <u>OR</u> one of the scholarships.

Eligibility will be reviewed once application is submitted. Applications and supporting materials need to be submitted to the Berrien County MSU Extension office at 1737 Hillandale Road, Benton Harbor, MI 49022.

NAME					
NAME		MIDDLE		LAST	
ADDRESS	STREET				
	STREET	APT. NO.	CITY	STATE & ZIP	
PHONE		DATE OF BIRTH		AGE	
FATHER'S NAMI	Ξ	FATHER'S OCCUPATION			
FATHER'S ADDF	RESS				
		MOTHER'S OCCUPATION			
MOTHER'S ADD	RESS				
HIGH SCHOOL(	S) ATTENDED (INC. 7	TRANSCRIPT)			
YEAR OF GRAD	UATION	HIGH SCHOOL GRA	ADE POINT AVERAG	GE	
NAME OF COLLEGE AND ADDRESS (ATTACH TRANSCRIPT)CUMM. GPA					
MAJOR OR FIEL	D YOU PLAN TO PU	RSUE			
TRANSCRIPT)		EGE OR SCHOOL OF HI	·	`	
SCHOOL	YEARS A	TTENDED GRA	DE POINT AVERAG	 BE	
SCHOOL	YEARS A	TTENDED GRA	DE POINT AVERAG	BE .	
SCHOOL ACTIV	ITIES (SUCH AS MUS	SIC, SPORTS, CLUBS, O	FFICES HELD, AWA	ARDS RECEIVED):	
HIGH SCHOOL:					
COLLEGE:					

## NAMES AND LOCATIONS OF ALL 4-H CLUBS IN WHICH YOU WERE A MEMBER: NAME YEARS OF MEMBERSHIP COUNTY NAME COUNTY YEARS OF MEMBERSHIP OTHER 4-H ACTIVITIES AND AWARDS RECEIVED (USE ADDITIONAL PAGES IF NECESSARY): OTHER ORGANIZATIONS (SUCH AS CHURCH, SCOUTS, OR JUNIOR ACHIEVEMENT) YOU HAVE BELONGED TO AND OFFICES HELD OR RECOGNITION RECEIVED: **HOBBIES:** SPECIAL INTERESTS OR SKILLS: LETTERS OF RECOMMENDATION: (LIST NAMES AND ADDRESSES OF THREE PEOPLE, EXCLUDING RELATIVES). ONE LETTER MUST BE FROM A BERRIEN COUNTY 4-H LEADER. LETTERS MAY BE SENT DIRECTLY TO THE EXTENSION OFFICE AT 1737 HILLANDALE ROAD, BENTON HARBOR, MI 49022. NAME **ADDRESS PHONE** NAME **ADDRESS** PHONE

ATTACH COPIES OF YOUR COLLEGE ADMISSION ACCEPTANCE LETTER AS WELL AS BOTH HIGH SCHOOL & COLLEGE TRANSCRIPTS.

PHONE

**ADDRESS** 

NAME