



# 4-H Senior Scholarship Application

Please Return to MSU Extension Ogemaw County

by 4:00 pm on April 1<sup>st</sup>, 2022

## Personal Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home): \_\_\_\_\_ (cell): \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Mother/Guardian's Name: \_\_\_\_\_

Address: \_\_\_\_\_

## 4-H Experience

How many years have you been in 4-H? \_\_\_\_\_

List the clubs you have participated in and number of years in each club:



Did you hold an office in any of the above listed clubs? (Please include club and years in each office)

List any awards or certifications you received during your participation in 4-H.

What is your most important accomplishment in 4-H? Describe.



How has 4-H has contributed to your growth and development as a person? Explain.

### ***High School Career***

School(s) Attended:

Dates Attended:

Anticipated Graduation Date:

Grade Point Average (4.0 scale):

List any extra-curricular or community activities you have participated in not affiliated with 4-H?



### Work Experience

<i>Date Started</i>	<i>Date Ended</i>	<i>Business/Address</i>	<i>Job Title</i>	<i>Job Description</i>

\*if more than three, list three most recent\*

### College Information

List the colleges/trade schools applied/accepted at:

What will be your program of study at college? (Please describe)



Has 4-H contributed to your chosen field of study? If so, how?

Do you have any additional comments for the scholarship selection committee?



## Acknowledgement

1. I understand that I must have been active at least three years in 4-H before I am eligible to complete this application.
2. I understand that this application is only part of the 4-H Senior Scholarship selection process. I will select a 4-H leader and one other unrelated adult to complete the recommendation forms and have them send recommendations directly to the address on the form by **4:00 pm, April 1<sup>st</sup>, 2022.**
3. I AGREE TO a **personal interview** on a date set by the scholarship committee.
4. If I am a scholarship recipient, I acknowledge that the scholarship must be used within 2 years of completing high school.
5. I understand that if I am the recipient of this scholarship, I must provide proof of college/trade school enrollment to the Ogemaw County Youth Council with my student number and the address of the college I am attending to send the payment to.
6. I also agree that I must return the full amount of the 4-H scholarship if another full-paying scholarship (including tuition, fees, room and board) is awarded. **If I withdraw from college** before I complete the academic year in which the scholarship was applied, I will return the amount awarded in the 4-H scholarship.

***I acknowledge that all the information above is accurate to the best of my knowledge.***

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**Mail to (or drop off at):**

*Ogemaw County 4-H Council  
205 S 8<sup>th</sup> St.  
West Branch, MI 48661*

OR

**Scan and email to:** [defejite@msu.edu](mailto:defejite@msu.edu)

**Please return by 4:00 pm April 1<sup>st</sup>, 2022.**

**If you have any questions, call Ogemaw County 4-H at 989-345-0692.**



4-H SENIOR SCHOLARSHIP RECOMMENDATION\*

Due: by 4:00 pm on April 1<sup>st</sup>, 2022

Applicant's Name: \_\_\_\_\_

How do you know this applicant? \_\_\_\_\_

PERSONAL COMMENTS ABOUT APPLICANT:

[Large empty box for personal comments about applicant]

I would recommend applicant for a 4-H scholarship: Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please give reasons: \_\_\_\_\_

I understand that this information will be kept confidential and will ONLY be seen by the scholarship awards committee.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

MAIL TO:

Ogemaw County 4-H Council
205 S 8<sup>th</sup> St.
West Branch, MI 48661

OR Scan and email to: defeijte@msu.edu

\*Unrelated adult that could include teacher, principal, coach, or counselor.



# Extra Space for Comments





### 4-H SENIOR SCHOLARSHIP - 4-H LEADER RECOMMENDATION

**Due: by 4:00 pm on April 1<sup>st</sup>, 2022**

Applicant's Name: \_\_\_\_\_

Number of years I have supervised applicant in 4-H work: \_\_\_\_\_

List projects supervised: \_\_\_\_\_

PERSONAL COMMENTS ABOUT APPLICANT:

I would recommend applicant for a 4-H scholarship:    Yes    \_\_\_\_\_    No    \_\_\_\_\_

If no, please give reasons: \_\_\_\_\_

\_\_\_\_\_

*I understand that this information will be kept confidential and will ONLY be seen by the scholarship awards committee.*

4-H Leader Signature: \_\_\_\_\_    Printed Name: \_\_\_\_\_

MAIL TO:

*Ogemaw County 4-H Council  
205 S 8<sup>th</sup> St.  
West Branch, MI 48661*

**OR Scan and email to:** [defejte@msu.edu](mailto:defejte@msu.edu)



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