

Application Form**2024 4-H Youth Council Scholarship Award Program**

Application Deadline: The completed application, including 4-H leader letter of recommendation, is due in St. Joseph County MSU Extension office by 4:00 p.m. on **Monday, April 29, 2024**. Only applications received by this deadline will be submitted to the Scholarship Selection Committee. It is the responsibility of the applicant to follow-up and make sure all application requirements have been met by the **April 29th** application deadline, including receipt by the St. Joseph County MSU Extension office of your 4-H Leader Recommendation Form and copies of your high school/college transcript and 4-H Project Completion Record*.

* Materials available at the St. Joseph County MSU Extension office. Call 269-467-5511 to request a copy.

Purpose: To assist graduated seniors and college students who are current or former St. Joseph County 4-H members fund their education beyond the high school level. The **4-H Youth Council** will award a total of eight (8) scholarships: up to four (4) scholarships in the amount of \$750.00 each, two (2) \$1,000.00 scholarships, and one (1) \$1,500.00 to high school seniors and college students. The **4-H Achievement/Service/Leadership Scholarship** in the amount of \$1,500.00 will be awarded to an exceptional high school scholarship applicant. The recipients of any and all scholarships covered by this application/interview process will be selected from among eligible applicants as described below.

Eligibility requirements:

1. Must be a current or former member of the St. Joseph County 4-H Program.
2. Must be a graduating senior (or college student for the Youth Council Scholarship), during the year of application.
3. Must have completed a minimum of three (3) years of 4-H work during your four (4) years of high school.
4. Must have been accepted at a post-high school educational institution and will attend as a full-time student.
5. College student applicants for the Youth Council Scholarships must be in their first four (4) years of college immediately following high school graduation.
6. Qualified applicants may apply annually up to four (4) years.

Application:

Applicant Name _____ Gender _____

Address _____

Your name as you wish it to appear for publicity purposes _____

Telephone Number (_____) _____

Email Address _____

Date of Birth ____ / ____ / ____ 4-H Age (as of January 1, 2024) _____

High School _____

High School Guidance Counselor's Name _____

School/Institution you will attend _____

Vocation/Career you plan to pursue _____

Number of years needed to complete course of study _____

Current High School Student: _____

Current College Student: _____

Year of High School Graduation _____

List 4-H Club(s) in which you are/have been a member:

Number of years in 4-H in St. Joseph County _____ Number of years in 4-H in other counties _____

(Other County Name(s) _____)

Leadership: List 4-H leadership activities in which you have been involved which have made a significant contribution to your local 4-H club and/or the county 4-H program (i.e. club officer, teen leader, 4-H Youth Council member, camp counselor, workshop/clinic resource person, committee member at club/county/state level, etc.).

Community Service: List community service activities you have been involved with where you have given of your time/skills/abilities in service to others.

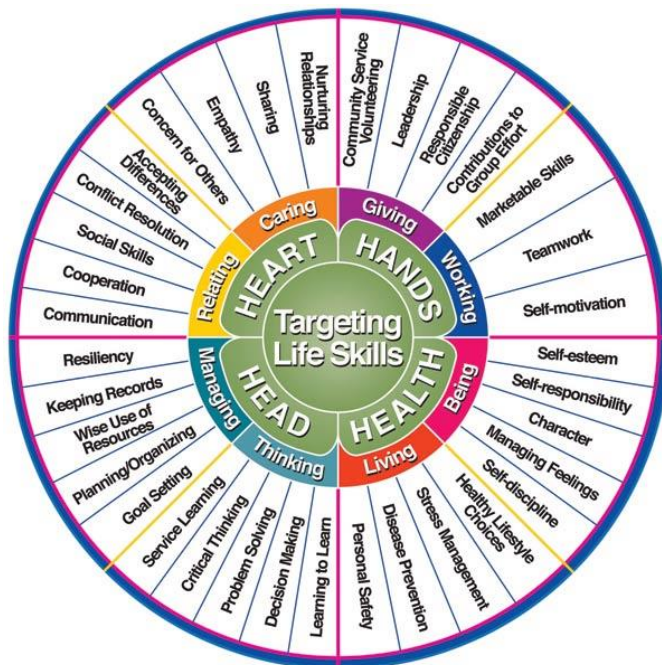
Through 4-H ... _____

Through church, school, other clubs/organizations... _____

Recognition and Awards: List 4-H recognition and/or awards you have received which are the most meaningful to you.

Essay (500 words or less): Using the 4-H Life Skills Model, choose 3 life skills that 4-H has helped you develop to prepare you for your future. Attach additional pages as needed.

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Growth and Development (350 words or less): How has your involvement in 4-H contributed to your career plans, your personal growth, and development?

4-H Promotion: Indicate ways in which you have promoted/encouraged participation in 4-H (i.e. general promotion, or promotion of a particular 4-H project/program/event/activity, etc.).

References: List three (3) references (do not include relatives or MSU Extension staff members), and provide complete information requested on each reference.

1. Name _____ Telephone No. (_____) _____
Street/P.O. Box _____ City _____
State _____ Zip Code _____
Email _____
Relationship to applicant _____

2. Name _____ Telephone No. (_____) _____
Street/P.O. Box _____ City _____
State _____ Zip Code _____
Email _____
Relationship to applicant _____

3. Name _____ Telephone No. (_____) _____
Street/P.O. Box _____ City _____
State _____ Zip Code _____
Email _____
Relationship to applicant _____

Application Checklist:

_____ Pages 1-6 of the Scholarship Application Form

_____ 4-H Leader Recommendation Form

_____ 4-H Project Completion Record

_____ High School/College Transcript

Applicant Statement of Understanding:

1. I understand completion of this application is only part of the scholarship selection process.
2. I understand I am responsible for ensuring that the 4-H leader of my choice (organizational or project leader) receives, completes, and returns the 4-H Leader Recommendation Form to the St. Joseph County MSU Extension office, 612 E. Main St., Centreville, Michigan, 49032 by the **April 29, 2024** application deadline.
3. I understand I am responsible for calling (269-467-5511) the St. Joseph County MSU Extension office to request a copy of my official **4-H Project Completion Record** to submit with my scholarship application.
4. I understand I am required to participate in a personal interview in-person, or by Zoom if absolutely necessary, with the 4-H Youth Council Scholarship Selection Committee on **Saturday, May 11, 2024**.
5. I understand the decision of the 4-H Youth Council Scholarship Selection Committee is final.
6. I/we have reviewed the application to ensure the enclosed information is correct and accurate.
7. **I understand I am responsible for repaying the 4-H Youth Council the full amount awarded in this scholarship if I do not complete the term/semester of schooling for which the scholarship is awarded. I further understand that such repayment must be made by no later than April 16 of the following year.**

Applicant Signature _____ Date ____/____/____

Parent/Guardian (if applicant is under 18) _____ Date ____/____/____

Mail/deliver all pertinent information to:

**St. Joseph County 4-H Youth Council
Attn: Scholarship Committee
612 E. Main St
Centreville, Michigan 49032**

Note: St. Joseph County MSU Extension office hours are Monday - Friday 8:00 a.m. - 4:00 p.m. There is also an after-hours drop box available on the East side of the building next to the employee entrance.