Date Received	/ /

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 <u>all</u> 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 ten (9) 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:

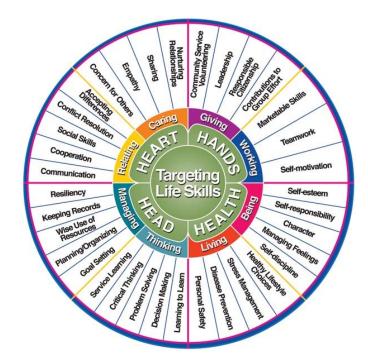
- 1. Must be a current or former member of the St. Joseph County 4-H Program.
- 2. Must be a graduating senior (or college student for the Youth Council Scholarship), during the year of application.
- 3. Must have completed a minimum of three (3) years of 4-H work during your four (4) years of high school.
- 4. Must have been accepted at a post-high school educational institution and will attend as a <u>full-time</u> 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 ()_				
Date of Birth/ 4-H Age (as of January 1, 2	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			

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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.).
(continued on page 5)

References: List three (3) references (do not include relatives or MSU Extension staff members), and provide complete information requested on each reference. Name Telephone No. () 1. Street/P.O. Box _____ City _____ State _____ Zip Code _____ Relationship to applicant 2. Name ______Telephone No. (_____) ____ Street/P.O. Box _____ City _____ State _____ Zip Code _____ Relationship to applicant ______ Name _______Telephone No. (_____) _____ 3. Street/P.O. Box ______ City ______ State _____ Zip Code _____ Relationship to applicant _____

pplication 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.
- 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 <u>required</u> 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 <u>full amount</u> 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 Attn: Scholarship Co		ouncil			

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.

Centreville, Michigan 49032

612 E. Main St