

## Daviess County 4-H Council Scholarship for Graduating Seniors

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Years in 4-H \_\_\_\_\_

Parent or Guardian Names \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of school currently attending and/or last attended \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of school you will be attending as of September 1 this year \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What is your planned major in college/vocational school? \_\_\_\_\_

What do you plan to do following college graduation? \_\_\_\_\_

What other financial aid or scholarships are you receiving? \_\_\_\_\_

Name 4-H Leaders who have helped you reach your goals \_\_\_\_\_

### Statement by 4-H Member

I personally have prepared this report and certify that it is accurately reflect my work:

Date \_\_\_\_\_ Signature of 4-H Member \_\_\_\_\_

Date \_\_\_\_\_ Signature of Parent \_\_\_\_\_

*Please fill out the entire form so that you may be eligible to receive a 4-H Scholarship.  
There may be more applicants than there are scholarships, so be sure to do your best.*



- A. Attach your current Achievement Application.**
- B. Please submit (in essay form) what you think is the most beneficial lesson you have learned from your involvement in 4-H. (250 word minimum)**

## **Requirements**

- 1. Must be a resident of Daviess County.
- 2. Must be currently involved without pay in 4-H.

***Return Application to:***

**Daviess County Cooperative Extension Service**

**Attn: 4-H Youth Development**

**4800A New Hartford Road**

**Owensboro, Kentucky 42303-1800**