| Date Received | 1 1 |
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Application Form

2025 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 21, 2025. 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 21st 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 nine (9) scholarships: up to four (4) scholarships in the amount of \$750.00 each, three (3) \$1,000.00 scholarships, and one (1) \$2,000.00 to high school seniors and college students. The 4-H Achievement/Service/Leadership Scholarship in the amount of \$2,000.00 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.
- Must be a graduating senior (or college student for the Youth Council Scholarship), during the year of application.
- Must have completed a minimum of three (3) years of 4-H work during your four (4) years of high school.
- Must have been accepted at a post-high school educational institution and will attend as a full-time student.
- College student applicants for the Youth Council Scholarships must be in their first four (4) years of college immediately following high school graduation.
- Qualified applicants may apply annually up to four (4) years.

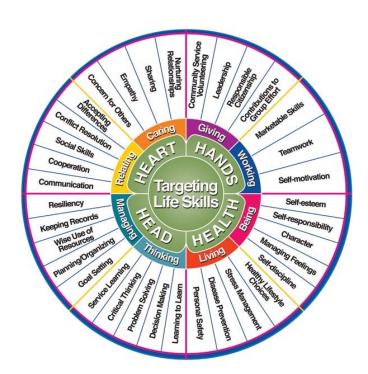
Application:

| 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 J | anuary 1, 2025) |
| 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: |
| | Vear 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) |) |
| | have been involved which have made a significant contribution to you officer, teen leader, 4-H Youth Council member, camp counselor, at club/county/state level, etc.). |
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| | |
| Community Service: List community service activities time/skills/abilities in service to others. | you have been involved with where you have given of your |
| Through 4-H | |
| | |
| Through church, school, other clubs/organizations | |
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| Recognition and Awards: List 4-H recognition and/or a | awards you have received which are the most meaningful to you. |
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| 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? |
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| 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.). |
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| Referen | ces: List three (3) references (do <u>not</u> include relatives or MSU | Extension staff members), and provide complete |
|----------|--|--|
| informat | tion requested on each reference. | |
| | | |
| 1. | Name | _Telephone No. () |
| | | |

| | Street/P.O. Box | | City |
|-----|--------------------------------|------------------|------------------|
| | State | Zip Code | |
| | Email | | |
| | Relationship to applicant | | |
| | Name | | Telephone No. () |
| | Street/P.O. Box | | City |
| | State | Zip Code | |
| | Email | | |
| | Relationship to applicant | | |
| | Name | | Telephone No. () |
| | Street/P.O. Box | | City |
| | State | Zip Code | |
| | Email | | |
| | Relationship to applicant | | |
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| pli | cation Checklist: | | |
| | _ Pages 1-6 of the Scholarship | Application Form | |
| | _ 4-H Leader Recommendatio | n Form | |
| | _ 4-H Project Completion Rec | ord | |
| | _ High School/College Transcr | ipt | |

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 21, 2025 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 3, 2025.**
- 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-H Youth (Attn: Scholarship Committee 612 E. Main St | Council | | | |

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 (black mailbox) available on the East side of the building next to the employee entrance.

Centreville, Michigan 49032