## ALBANY COUNTY 4-H FOUNDATION/COUNCIL APPLICATION FORM Return to Albany County Extension Office by March 23<sup>rd</sup> (This scholarship can only be received once)

Attach transcript of your high school credits, one letter of recommendation from your club leader, two letters of recommendation from other sources, a copy of your ACT/SAT score(s) AND a copy of your 4-H Record Books.

## PERSONAL DATA

FULL NAME:				
PHONE #:		E-MAIL:		
COMPLETE MAILING ADDRESS	S:			
STREET, ROUTE OR BOX		TOWN	STATE	ZIP
NAME OF PARENT OR GUARD FATHER:	IAN:			
NAME				
MOTHER:				
NAME				
HIGH SCHOOL ATTENDED:				
HIGH SCHOOL GPA:	RANK IN CLASS:	ACT/SAT SCORE:		
DATE OF GRADUATION:	NUI	MBER GRADUATING:		
COLLEGE OR INSTITUTION PLA	ANNING TO ATTEND:			
DATE YOU WILL ENROLL IN HI	GHER EDUCATION:			
FIELD PLANNING TO MAJOR II	N:			
PLEASE EXPLAIN WHY YOU HA	AVE CHOSEN THIS PARTICUL	AR MAJOR AND COLLEGI	E/INSTITUTION.	
Applicant's Printed Name: _				
Annlicant's Signaturo				

Parent's Signature:			
HOW DO YOU FEEL YOUR EXPERIENCE AND INVOLVEMENT IN THE 4-H PROGRAM HAS PREPARED YOU			
FOR YOUR COLLEGE EXPERIENCE AND CAREER? (At least 1 page typed but no more than 3 pages)			

Remember to include a copy of your 4-H record book from all your years in 4-H.