

# **CONVERSE COUNTY 4-H FOUNDATION MEMORIAL SCHOLARSHIP APPLICATION**

**(YOU MUST HAVE COMPLETED HIGH SCHOOL AND BE ENROLLED IN A COLLEGE AT TIME OF APPLICATION.)**

**APPLICATION MUST BE TYPED OR COMPUTER GENERATED TO BE CONSIDERED**

**\*PLEASE ENCLOSE A PHOTO IF YOU ARE A FIRST YEAR APPLICANT**

**\*\*IF YOU RECEIVE A FOUNDATION SCHOLARSHIP AND FAIL TO WRITE A THANK YOU TO THE FOUNDATION, YOU WILL NOT BE ELIGIBLE FOR FOUNDATION SCHOLARSHIPS THE FOLLOWING YEAR.**

**\*\*\*APPLICATION DEADLINE IS THE 2<sup>ND</sup> FRIDAY OF JANUARY BY 5:00 PM OF THE CURRENT YEAR. ANY APPLICATION RECEIVED AFTER THE DEADLINE WILL NOT BE CONSIDERED FOR A SCHOLARSHIP.**

**PLEASE REMEMBER TO SIGN YOUR APPLICATION**

DATE \_\_\_\_\_ NUMBER OF YEARS IN 4-H IN CONVERSE COUNTY: \_\_\_\_\_

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS TO SEND SCHOLARSHIP: (City, State, Zip)

\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

NAME OF COLLEGE/INSTITUTE ATTENDING: \_\_\_\_\_

COURSE OF STUDY YOU ARE PURSUING: \_\_\_\_\_

YEAR IN COLLEGE (FIRST, SECOND...): \_\_\_\_\_

CURRENT SEMESTER G.P.A.: \_\_\_\_\_ CUMULATIVE G.P.A.: \_\_\_\_\_

NUMBER OF CREDITS TAKEN DURING FALL SEMESTER: \_\_\_\_\_

NUMBER OF CREDITS TAKEN DURING SPRING SEMESTER: \_\_\_\_\_

STATE ANY EXTRA-CURRICULUR ACTIVITIES YOU ARE INVOLVED IN (WORK STUDY, SPORTS, ASSOCIATIONS, ETC.

IN A PARAGRAPH OR MORE, TELL US ABOUT YOURSELF (PAST AND PRESENT) AND YOUR INVOLVEMENT IN THE CONVERSE COUNTY 4-H PROGRAM.

INCLUDE ANY OTHER INFORMATION YOU FEEL THE SELECTION COMMITTEE MIGHT BE INTERESTED IN.

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Signature

Date