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**2020 Kansas 4-H Scholarship Application**

Check with local Extension Office for due date

**Staple entire application packet in upper left-hand corner** in the 1 to 8 numerical order and submit to the local extension office by the local deadline. Complete all blanks on form as “NA” if not applicable.

**Scholarship Process: (Submit scholarship application packet in the following numerical order)**

1. Complete **Kansas 4-H Scholarship Application Form**. Required information must be submitted on separate one-sided pages with 1.5-inch left margin and 1-inch top and right margins. Font size minimum of 10 point. If handwritten must be legible. Illegible forms will not be considered.
2. **High School Transcript or most recent college semester grades.** Transcript can be unofficial and is not required to be in sealed envelope. Homeschool students must provide appropriate documentation for grades.
3. **A letter of recommendation** from high school or college personnel, whichever is most appropriate for current student.
4. **A letter of recommendation** from a non-related 4-H leader or non-related extension agent, assistant, or specialist **currently** employed by K-State Research and Extension.
5. **One-page** single-spaced summary of **4-H significant leadership, community service, participation and recognition**, up to and including the 2019-2020 4-H year. Bullet lists or tables may be used. Start with the most recent accomplishments. Label the 4-H activities: L=local; C/D= County/District; A/R= Area/Regional; S=State; N=National; I= International.
6. **One-page essay,** double-spaced, on how “4-H has impacted me.”
7. **One-page** single-spaced summary of non-4-H leadership, community service, participation and recognition in school and community, up to and including the 2019-2020 4-H year. Start with the most recent accomplishments.
8. **A short paragraph about your educational and long-term career goals.**

**Scholarship Scoring:**

**4-H Leadership – 40%**

**4-H Citizenship/Community Service – 30%**

**4-H Participation, Recognition – 20%**

**Non-4-H Leadership, Citizenship, Recognition – 10%**

**Section 1. Personal and Academic Information**

County/District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years as a 4-H member: \_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(First) (Middle) (Last)

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_

(Street, Box or Route) (Town/City) (Zip)

Primary Telephone: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of Residence:  Farm  Town under 10,000/open country

Town 10,000 -50,000  City over 50,000

Year in School: High School \_\_\_\_\_ College \_\_\_\_\_ HS Graduation Date \_\_\_\_\_\_

Name of current school attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Location of college to attend in fall \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intended college major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ minor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School GPA \_\_\_\_\_ out of \_\_\_\_\_ points Number in senior class \_\_\_\_\_\_

Senior class ranking, if available \_\_\_\_\_ ACT Composite score \_\_\_\_\_ Or SAT Composite score \_\_\_\_\_\_

College GPA \_\_\_\_\_ out of \_\_\_\_\_ points

Are you a member of Alpha of Clovia?  yes  no

Are you a returning adult student? Yes  No

Race*:*Caucasian  African American  American Indian/Alaska Native  Asian/Pacific Islander

Ethnicity*:*Hispanic/Latino Yes  No

Have you participated in an international experience (IFYE, 4-H/Japanese/AFS, faith-based or other community service organizations)? Yes  No  If yes, please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Have you experienced the death of a parent?  Yes  No

**Master Farmer/Homemaker -** Master Farmer legacy  Yes  No

Family Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_\_

**Section 2: Awards and Recognition**

Kansas 4-H Key Award  Yes  No Year received

Previous Kansas 4-H Scholarship(s) awarded

Scholarship name and year received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 3: Financial Need**

**Estimated costs of your first year of college:**

Tuition \_\_\_\_\_\_\_\_\_\_\_\_ Housing \_\_\_\_\_\_\_\_\_\_\_\_ Books \_\_\_\_\_\_\_\_\_\_\_ Fees \_\_\_\_\_\_\_\_\_\_\_

Technology \_\_\_\_\_\_\_ Transportation \_\_\_\_\_\_\_\_\_ Personal expenses \_\_\_\_\_\_\_\_ **TOTAL Expenses \_\_\_\_\_\_\_\_**

Are other family members attending college currently?  Yes  No

Family member(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you received other scholarships for the upcoming year?  Yes  No

If yes, approximate total of scholarships: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you applying for financial aid for the upcoming year?  Yes  No

Do you plan to work this next year?  Yes  No

If yes, approximate number of hours per week: \_\_\_\_\_\_\_\_\_\_\_\_

Do you currently hold a job?  Yes  No

If yes, approximate number of hours per week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain need for financial assistance for college and what plans have been made for meeting financial needs.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section 4: Donor Appreciation**

* Please answer this question: What would you say to thank your scholarship donor if you were to receive a Kansas 4-H Scholarship?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Required Signatures:**

**Scholarship Conditions:** I understand that the application will be considered for all Kansas 4-H State Scholarships for which qualified. I understand that changes in educational plans including choice of College, University, etc. and intended major listed on the application may result in the recipient not being awarded the scholarship. It will be my responsibility to contact the Kansas State Research and Extension Department of  
 4-H Youth Development about any changes to this application.

**Applicant:** I have personally prepared the Kansas 4-H Scholarship Application and believe it to be accurate and correct. I understand the **Scholarship Conditions** for the Kansas 4-H Scholarships.

**Applicant Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Extension Agent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All applications submitted become the property of 4-H Youth Development and will not be returned.

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**Kansas State University Agricultural Experiment Station and Cooperative Extension Service**

MG-50 (2020) December 2019

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