



Wasco County 4-H Scholarship Application

All information is kept confidential.

Participant's Name _____ County _____

Parent(s) Name(s) if Minor _____

Address _____ City _____ Zip _____ Phone _____

Event _____ Cost _____

How much scholarship money are you applying for? \$ _____ (Scholarships are generally awarded for no more than 50% of the cost of the event.)

Explain the need/event – why do you feel you qualify for a scholarship?

I understand that scholarships are given at the discretion of Wasco County 4-H and are subject to availability.

Signature of Parent or Guardian

Date

**Return this form to: Wasco County 4-H
400 E. Scenic Dr., Suite 2.278
The Dalles, OR 97058**

Office Use Only: Amount Awarded \$ _____ Date Approved _____ Source _____
Check # _____ Date Paid _____