

Jefferson County 4-H Association

Member Scholarship Application

Scholarship application to be **filled out by participant, with required signatures.**

Please complete and return this form to the Jefferson County 4-H Association, 850 NW Dogwood Lane, Madras, Oregon 97741.

Name:	Phone:
Address:	Cell:
	Email:
Parents/Guardian:	
4-H Leader:	
4-H Project (s):	
Are you currently a 4-H member? Yes No	
If not, would you like information? Yes No	

Requesting a scholarship for: (please circle)

HDLR **Summer Conference** **Camp Tumbleweed** **Leader Training** **Other**

Date of activity: _____

Location: _____

What is the full cost of the activity? _____

Amount you or your family can contribute towards the cost? _____

Please itemize expenses: Registration _____ Meals _____ Lodging _____

(Please be prepared to turn in receipts)

Travel _____ Other _____

What do you plan to learn from attending this event or activity? _____

How will you share what you have learned at this event or activity with your 4-H club or with the Jefferson County 4-H Program?

I understand that the Association Board would like to hear about my experience, I would like to report to the Board on: _____

(Association Board meets on the third Monday evening of each month)

Sincerely,

Member Signature

Date

Parent/Guardian Signature

Date

***All applications must be filled out and signed by the participant and accompanied by the signature of a parent or guardian to be considered.**

Association Board Action	
Amount approved:	
Reason for disapproval:	
Check #:	Pay from Account #:
Treasurer Signature:	Date: