

DENNIS NEVIN SCHOLARSHIP APPLICATION

Due to OSU Extension Office May 1
569 Hanley Road
Central Point, OR 97502

Recipients will be notified of their award in August.

Email: _____

Phone Number: _____

Social Security # will only be requested after winner chosen

Name _____

Mailing Address _____

Telephone Number _____ Grade _____ Date of Birth _____

Name of Parent or Guardian _____

Education & Career Plans

Name/Address of school you plan to attend _____

Date you plan to enroll _____

Indicate your probable area of study/major _____

Briefly state your future education and career plans:

4-H Experiences

4-H Club(s) in which you are currently enrolled _____

Number of years in 4-H _____

Explain briefly the 4-H projects in which you have been enrolled and the scope (i.e. related activities, size of project) of involvement in the projects:

Explain your current 4-H involvement (i.e. how you are active in the 4-H program now), projects you are now carrying and the scope of each:

Leadership in 4-H:

School and Community Activities (include hours):

Community Service Activities, club/local level:

At County level:

At State level:

How have your experiences in 4-H prepared you for life after graduation?

In the space below, explain why the scholarship committee should select you for this scholarship.

Financial Analysis

Explain your need for financial assistance to provide for your college education during the next year and describe your plans for meeting this financial need. Add any extenuating family circumstance you want the committee to consider.

List anticipated college costs for the next year:

Tuition Fee \$ _____ Board \$ _____ Room \$ _____

Books \$ _____ Lab Fees \$ _____ Personal Expenses \$ _____

Transportation \$ _____ Other \$ _____

Number of children in family _____ Number of children/adults in college _____

Leader Statement

In the space below (or with an attached letter), please provide a brief evaluation of the applicant and their involvement. Indicate special circumstances, such as financial need, which should be considered.

Scholarship Information

Grade point average (GPA)_____ (Important note: base GPA on A = 4.0. If scale is other than A = 4.0, please convert to a 4.0 scale.)

I certify that the information provided in this application is true, correct, and complete to the best of my knowledge.

Member's signature_____ Date_____