

SCHOLARSHIP APPLICATION
for
Jackson County 4-H Leaders Association Scholarship

Name _____ Social Security # _____ We will need this if you receive an award

Email _____ Phone # _____

Mailing Address _____

Grade _____ Date of Birth _____ Parent Phone Number _____

Name of Parent or Guardian _____

4-H Club: _____

FFA Chapter: _____ Chapter # _____

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. You may use additional pages if you'd like:

Additional Requirements:

1. "My 4-H Story," updated to include your final year in 4-H (2-6 pages). Attach to this application form.
2. "4-H Resume," which must be current and include your final year in 4-H. Attach to this application form.
3. Interview with the Scholarship Committee (we will contact you to arrange a time and location).

Questions? Please email Deb Brown at dbrown@sou.edu

Updated 4/2021