

Lincoln County 4-H Leaders' Association

Need-based Scholarship Application

All information is kept confidential

Participant's Name _____ Club _____

Parent/Guardian Name(s) _____

Address _____

Phone _____ Email _____

Event/Reason _____ Cost _____

How much scholarship money are you applying for? \$ _____

What is your gross annual household income (choose one): less than \$25,000 \$25,000-\$45,000
 \$45,000-\$65,000 over \$65,000

Do you qualify for other need-based assistance? If so, what: _____

How many children (under 18) are in your household _____

Have you or your child ever participated in this project/event before? Yes No

Any other information the selection committee should know? _____

"I understand that need-based scholarships are given at the discretion of the Lincoln County 4-H Agent and/or Leaders' Association and are subject to availability. All scholarships are on a first come, first served basis. All recipients are required to participate in at least one county-wide fundraiser during the year in which the scholarship is received (in addition to any other program fundraising requirements)."

Signature of Parent or Guardian (required) _____

Signature of Youth _____

**Return this form to Lincoln County OSU Extension Service – 4-H
1211 SE Bay Blvd. Newport, OR 97365**

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

Notes _____