### **Important Information and Dates**

All applications are due to the County Extension Office on:

# Thursday, June 20, 2024 by 5:00 p.m.

All Applicants must be current graduating seniors who are/have graduated in May of 2024.

### **REQUIRED**

<u>All applications for any Scholarship are **required** to turn in a biography.</u> The biography will be read at the 4-H Awards and Recognition Banquet if the member receives one of these awards. The biography should be 200 words or less, written in third person, and describe their 4-H career. Highlights of major projects, life skills learned, or special notes that the member would like to share with the audience should be included. County Extension Agents will edit as needed to fit the format of the banquet.

name:
Applications submitted (check all that apply)
County 4-H Adult Leaders Association Scholarship

Biography:

Cou	nty Name 4-H Adult Leaders Association Scholarships
<i>,</i>	ult Leaders Association will give 6 (six) \$3000 scholarships to deserving County Name
	Scholarships will be given in memory of County 4-H members who were very
	_ County 4-H program for many years:
	ith Memorial Scholarship,
The Mrs. Si	mith Memorial Scholarship,
The Mr. Go	nzales Memorial Scholarship
The purpose of eac	h scholarship is to recognize 4-H members who have been active in theCount
4-H program for at least the	hree years. Selection is based on 4-H experience, which includes 4-H Projects, 4-h
leadership, 4-H Achieveme	nts, Community Service and Non 4-H Activities.
Scholarships will be	e paid out in one lump sum payment of \$3000. It will be paid the spring semester after
the scholarship recipients	freshman year. Scholarship winners must take a minimum of 12 hours for their fa
semester with proof of the	eir registration and fee statement provided to theCounty Adult Leaders
Proof should be sent to the	e Brazos County Extension Office. Once this is received, the Adult Leaders
Association Treasurer will f	orward your scholarship disbursement. The recipient is required to make a grade poin
average of 2.0 or above	based on a 4.0 system. It is the recipient's responsibility to provide the required
information to the	_ County 4-H Adult Leaders Association to receive the scholarship. Only graduating
seniors are eligible for the s	scholarship.
Each applic	eant should send a:
•	Completed Adult Leaders Association Scholarship form.
•	Biography
•	Narrative
•	Current copy of his/her high school transcript to the County Extension Office by the application deadline date.
•	Completed 2023-2024 Recordbook – does not need to be judged.





# **4-H Adult Leaders Scholarship Application Form** (Must be no longer than 6 pages)

1.	Date with Year:		
2.	Full Name of Applicant:		
	Male or	Female - (check one)	
3.	Home Address:	Email:	
4.	City:	Zip:	
	County:4-H Club:		
6.	Home Phone #: (area code)		
8.	Date of Birth:	Age.	
9.	Father's Name:		
10.	Father's Occupation:		
11.	Mother's Name:		
12.	Mother's Occupation:		
13.	Number and ages of Brothers:	Sisters:	
14.	ACT or SAT Score:		
15.	College, University or School you plan to attend:		
16.	Have you applied?	Have you been accepted?	
17.	Field of Study:		
	Give specific reasons why you plan to study in this fi	eld.	

## PROJECTS - LEADERSHIP - HONORS - COMMUNITY SERVICE - NON 4-H

• List your five (5) major 4-H Projects completed:

# Years	Project:	Major Activities Related to Project

• List your five (5) major 4-H Leadership activities:

Activity:	Your Major Responsibility
	Activity.

Year	Honor or Achievement:		What did it mean to you?		
List your five (5) major Community Service activities:					
Year	Activity:		Your Major Responsibility		
School, Church and Employment: (school organizations, sports, church, community, etc.)					
Year	Organization:		Your Major Responsibility		

• List your five (5) most important 4-H Achievements or Honors:

NARRATIVE - attach a typed narrative not to exceed one page double spaced about yourself
to cover any points in the application that you feel need to be further explained, such as how
this scholarship will benefit your future and other information not covered that you feel is
important for the selection committee's consideration.

### **CERTIFICATION**

We have examined this application and find the records, true, accurate and complete.

(Signature of Applicant)	(Date)	(Phone # w/Area Code)
(Signature of Parent or Guardian)	(Date)	(Phone # w/Area Code)
(Signature of CEA or AST)	(Date)	(Phone # w/Area Code)





# **Adult Leaders Association Scholarship**

### JUDGING SCORE SHEET

CATEGORY	<u>POINT VALUE</u> (Maximum Value)	SCORE		
1-H EXPERIENCES:	(Maximum value)			
◆ PROJECTS	15			
◆ LEADERSHIP ACTIVITIES	15			
◆ ACHIEVEMENTS AND/OR HONORS	15			
◆ COMMUNITY SERVICE	15			
NON 4-H ACTIVITIES	10			
NARRATIVE:				
◆ CONTENT	20			
<b>♦</b> GRAMMAR	10			
TOTAL MAXIMUM SCORE	100			
APPLICANT INFORMATION:				
NAME:				
CLUB:				
COLINITY:				