

Name:





Gratiot County 4-H Leader's Council Scholarship/Reimbursement Application

Address:			
Phone: Email:			
Title of event:			
Date of Event:	Registration Deadline for Event:		
Cost of Event:	Amount Scholarship Requested:		
Amount prepaid by member:	Registered for event?	Yes	No
Primary 4-H Club Name:			
Secondary 4-H Club, if applicable:			
Project Leader Name:			
If not MSU Extension event, provid	de Organization Name and Address:		



4-H Parent/Guardian Signature:





How will you use the information from the event you attend?:

In a paragraph, describe why you wish to attend this event:

4-H Youth Signature:

PLEASE RETURN AT LEAST 2 WEEKS BEFORE YOUR EVENT REGISTRATION DEADLINE OR 2 WEEKS PRIOR TO EVENT FOR REIMBURSEMENTS.

Submit by mail, email or in person at:

Gratiot MSU Extension c/o Gratiot 4-H Leader's Council 219 N. State Street Alma, MI 48801 thom1367@msu.edu

thomason ee maa.caa

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