



# Montcalm County Extension 4-H Scholarship Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

4-H Club: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Date (s) of Event: \_\_\_\_\_

Total Cost of Event: \_\_\_\_\_ Scholarship Request Amount: \_\_\_\_\_

Please describe what you hope to gain from this event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you think that you'll use what you learn from this event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_ agree to provide approved pictures from the event to post to social media and in the newsletter, along with a paragraph on what the event was about, what you learned from it, and a little bit about the impact made from receiving the scholarship, within five (5) days of the event ending.

Participant's Signature: \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_

4-H P.C. Signature: \_\_\_\_\_ Amount Awarded: \_\_\_\_\_