Essex County 4-H Foundation
Scholarship Application

Name____________________________________________ Age___________________

Address_________________________________ Town_____________ State____ Zip______

Club ______________________________________________________________________

Phone __________________   Email Address:___________________________________

Applying for scholarship to attend:

________________________________________________________________________

This is a (circle one)      County 4-H Event   State 4-H Event   National 4-H Event
Leader Training        Other________________________________

(please explain)

Location of trip___________________________________  Dates______ _____________

Total cost_______________

List fundraising events that you or your club have or will participate in:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

What contributions do you see yourself making to the county 4-H program as a result of
attending this 4-H Event?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Applicant’s signature________________________________ Signature of Leader or Parent

Return to:                          Melinda Birch, 4-H Educator
                                    UVM Extension
                                    316 Main St, Ste #101
                                    Newport, VT 05855