Orleans or Essex County 4-H Foundation
Leader Scholarship Application

Name ___________________________ Leader _____ # Years ______
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 Workshop Leader Training Other ______________________________
(please explain)
Location of event __________________________ Dates _______________
Total cost______________ Amount Requested________________

What contributions do you see yourself making to the county 4-H program and your club
as a result of attending this 4-H Event or what do you hope to gain by attending?

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Applicant’s signature __________________________ Signature of 4-H Educator __________________________

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