Polk County 4-H Camp Scholarship Application

Partial scholarships are available from the Polk County 4-H Foundation. Youth, please, complete entire application for consideration. Include one adult reference (page 2). Additional paper may be used as needed. Please turn in to the 4-H office by **May 1st**. The scholarship awardees will be notified by the end of May.

Name:_____ Age (as of Sept 1st): _____

Mailing Address:_____

Phone: (___) _____ 4-H Club:_____

Years in 4-H: __Are you applying to be a Counselor in Training (C.I.T.) or Counselor? ___

Which camp will you be attending? _____ Years at 4-H Camp:_____

Amount of Financial Assistance requested (do not leave blank): $_____

Monthly family net income: $_____ Total # of members in family: _____

List 4-H or other extracurricular projects, activities, and accomplishments:

_____
_____
_____
_____
_____

Why do you want to attend camp? What do you hope to gain from coming to camp?

_____
_____
_____
_____
_____

How will you share your camp experience with others to encourage more participation in the 4-H program? Will you commit to doing this?

_____
_____
_____
_____
_____

Over →

Why do you consider yourself to be an ideal candidate for this scholarship?

_____
_____
_____
_____
_____

Adult Reference
The adult reference may be a 4-H club leader, youth leader, teacher, or other individual who is not related to the youth applying for the scholarship.

Adult's Name: _____ Phone: (___) _____

How do you know this youth? _____ For how long? _____

Write a brief statement about why you believe the youth mentioned above should receive a scholarship to attend 4-H Camp.

_____
_____
_____
_____

_____
Adult Reference's Signature Date

I acknowledge that the above information is accurate to the best of my knowledge. If I receive a camp scholarship, I agree to write a thank you letter to the Polk County 4-H Foundation after my return from camp.

_____
Youth's Signature Date

_____
Parent's Signature Date