David D. Klamm Memorial Scholarship Application

Applications are due at the Leavenworth County Extension Office by JUNE 30th

Minimum Requirements:

- Member of Leavenworth County 4-H for 5 years or more
- Must have completed one year or more of post-secondary education. Scholarship is for 2nd year or above of post-secondary education
- Enrolled for 12 or more semester hours (check will be made to student upon receipt of tuition/expenses) OR
- Enrolled full-time in a technical institution (check will be made to student upon receipt of tuition/expenses)

Instructions:

- Staple entire application packet in upper left-hand corner in the 1 to 8 numerical order and submit to the local extension office by the local deadline.
- Application may be handwritten or typed. Illegible forms will not be accepted.
- Required information must be submitted on separate single-spaced one-sided pages.
- Submit scholarship application packet in the following numerical order:
  1. Complete the attached application form.
  2. Transcript of high school and most recent college semester grades. Transcripts can be unofficial. Photocopies of official transcripts are acceptable.
  3. A letter of recommendation from a non-relative 4-H leader
  4. List the projects you were involved in during 4-H and the number of years in each project
  5. A summary of 4-H significant leadership, community service, participation and recognition. Emphasizing the last 3 years in 4-H.
  6. A summary of non-4-H leadership, community service, participation and recognition in school, clubs, and community. Include high school and college level.
  7. Essay, 300-500 words, about your educational and long-term career goals and how you plan on achieving those goals.
  8. One-page essay on “How has your time in 4-H impacted your future goals and developed you for the career that you are wanting to achieve?”

Personal and Academic Information

Name (First/Last): ___________________________ Date of Birth: _____________
Address: ______________________________________
City: ___________________ State: _____________ Zip Code: ______________
Primary Phone: __________________________ Email Address: __________________
Name of College/Tech School currently attending: ___________________________
College Major: __________________________ Minor: ______________________
# of years in 4-H ____________ 4-H Club Name ______________________________
Name of 4-H Club Leader: ______________________________________________

I have personally prepared this application and believe it to be correct.

Applicant Signature: __________________________ Date: _______________

Printed Name: _______________________________