

David D. Klamm \$500 Memorial Scholarship Application

Applications are due at the Leavenworth County Extension Office March 1 of current year by 5:00 p.m.

Minimum Requirements:

- Member of Leavenworth County 4-H for 5 years or more
- Must have completed one year of post-secondary education. Scholarship is for 2nd year of post-secondary education
- Enrolled in 2 or 4 year college at 12 or more semester hours (check will be made out to college on behalf of the student) 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 7 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. Photocopies of 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 about your educational and long-term career goals, how 4-H has impacted your goals, and how you plan on achieving those goals

Personal and Academic Information

Name (First/Last): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: _____ Email Address: _____

Name of College/Tech School currently attending: _____

College Major/Trade: _____

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: _____