## JEWELL COUNTY 4-H ALUMNI/BOOSTER ACADEMIC SCHOLARSHIP Due Date April 15

QUALIFICATIONS to apply for this one year academic scholarship \*\*\* AN ACTIVE JEWELL COUNTY 4-H MEMBER (club and years as a member) \*\*\* A GRADUATING HIGH SCHOOL SENIOR **NAME** (middle) (first) (last) **ADDRESS** HOME PHONE \_\_\_\_\_\_ BIRTH DATE \_\_\_\_\_ PARENTS NAME & OCCUPATION: (father) (mother) Names and Ages of brothers and sisters: Names and Address of High Schools Attended: Contributions or attendance at Jewell County Family Fun Night: Describe extracurricular and community activities in which you have participated:

List distinctions, honors and awards you have	received:
	£:
ist 4-H events or activities that you have par	ticipated in (include awards received):
hy are you applying for this scholarship?	
	1.6
Thy did you chose this field of study?	
chool you will be attending and address of	f financial aid office:
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UBMIT THIS COMPLETED APPLICAT	TION, Copy of high school transcript, rank in

one (1) scholastic to: Jewell County 4-H Alumni Committee

% Mankato Extension Office 307 N Commercial Mankato, KS 66956