Activity Financial Assistance Application

Date of Application:		
Name:	Birthdate:	
4-H Club:		
4-H projects of which you are enrolled:		
Event:	Date of Event:	
Cost of Event:		
Please describe why you would like to attend this event:		
Please describe why you are requesting financial assistance:		
Please describe your involvement in your 4-H club:		
Please describe how you plan to share this information	n with other 4-Her's:	
Have you attended an event similar to this? What was	your experience?	
Please describe what you plan to learn from attending	this event:	

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4-H Project Scholarship Form

Applicant must have

Completed a minimum of one year in 4-H

Starting a new project that member has not enrolled in during previous years Completed entire 4-H year as verified by the Extension Agent and Club Leader

Participated in Stillwater County fair

Submitted completed application form by September 1 of each year.

In addition to application please include the following:

Copies of receipts related to project (must be reflected in financial records)

Letter from club leader regarding members' participation in the project as well as any other information relevant to member and project.

By completing this application the member and parent(s) and/or guardian(s) understands that the Stillwater Leaders Council is not financially responsible for any costs related to the project. One scholarship will be awarded and will not exceed \$100. Applications will be reviewed by Leaders Council. Additionally, it is understood that because the form has been submitted does not ensure that the applicant will be the chosen recipient of the scholarship.

The scholarship will be awarded at Achievement Night.

For additional questions regarding the application, please contact Tammi Kirch at 406-855-3839.

To Make The Best Better

Applicants Name:
Applicants Club:
Applicants Address:
Applicants Phone Number:
Applicants Email (if applicable):
Parent/Guardian Name(s):
Year in 4-H:
New Project:
Why Did You Choose This Project:
Other information applicant feels relevant to application or would like to share:

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: ______ Date: _____

Club Leader Signaure: _____ Date: ____

Extension Office Received Date: ______Initials: _____