





Paper Clover Scholarship Fund Application

Please submit this application to request scholarship funds to financially assist Arizona 4-H members to attend a camp or leadership activity. Please attach a registration form from the camp or leadership activity, if applicable, or provide the address funds should be mailed to. Application must be received with appropriate time for processing, before the scheduled event.

Applicant Information				
County:		Date:		
Applicant Name:				
	Last	First		M.I.
Parent email address:				
Name of 4-H Club:				
Camp or Leadership				
Activity:	An	nount Requesting: \$		
Cost of Camp or Activity: Date of Camp or Activity:		d you participate in a C Event? (Date?):		
		C Event: (Date:).		
Why do you want to attend this camp or	leadership activity?:			
Parent Signature			Date	
County Extension Signature			Date	
	For State Office U	Ise Only		
Approved Amount:				
State Extension Signature			Date	

Date Funds sent: