

4341 E. Broadway Rd., Phoenix, AZ 85040 • Phone: (602) 827-8200 • Fax: (602) 827-8292 • extension.arizona.edu/maricopa

#### MARICOPA COUNTY 4-H PROJECT COMMITTEE SCHOLARSHIPS

The Maricopa County 4-H Project Committees are proud to support 4-H'ers who have demonstrated dedication and determination to their specific project area throughout their years in 4-H. Each Committee will determine the number and dollar amount to be funded for the current year's applications prior to judging.

#### **Eligibility requirements for Scholarships:**

- 1. Be enrolled in and an active member of the Maricopa County 4-H Program (*if not a resident of Maricopa County, a county agreement must be on file in the 4-H Office*).
- 2. Have been enrolled in the designated project area for at least two (2) of the past four (4) years, including the current year.
- 3. Be a graduating high school student or first-year college student, up to 19 years of age, who will be enrolled in a post high school educational institution this fall.

#### To apply an applicant must:

- 1. Complete the attached application, a separate application must be submitted for each project area.
- 2. Include **two (2) letters of recommendation**: one from your 4-H leader and one school guidance counselor/someone from your school who is familiar with your achievements.

#### **Scholarship application process:**

- 1. Submit **one** (1) **copy** of each completed application to the Maricopa County Cooperative Extension Office no later than **5 pm on Tuesday**, **April 1**, **2025**.
- 2. Participate in a face-to-face interview with the scholarship board will follow. (specific times will be determined once all applications are received).
- 3. If selected as a recipient, you must submit proof of enrollment in the post high school institution you will be attending this fall. You may only be a scholarship recipient once in your 4-H career in each committee scholarship area.
- 4. Once enrollment is confirmed, scholarship funds will be sent directly to the recipient's educational institution from the Project Committee.

If you would like to apply for a scholarship, please return the attached application (1 copy per committee scholarship you are applying for), including two (2) letters of recommendation, to:

Maricopa County Cooperative Extension
4-H Youth Development
Valerie Gabrielson
4341 E. Broadway Road
Phoenix, AZ 85040
Or email to: gabrielsonv@arizona.edu

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### Maricopa County 4-H 2024-2025 Project Committee Scholarship Application

		Personal 1	Information		
Full Name:	I4			Birth Date:	
_	Last	First	MI		MM/DD/YYYY
Address:	Street Address				Apartment/Unit #
	City		State	Zip Coa	le
Home Phone:			Cell Phone:		
Email:					
4-H Club:				# of Yrs in 4-1	H:
		High Schoo	l Information		
School Name	:			Graduation Date:	
School Addre	ess:				
	Street Address				
	City		State		Zip Code
Phone:			Fax:		
	C	ollege or Instit	ution Informatio	n	
School Name	:				
School Addre	ess:				
	Street Address				
	City		State		Zip Code
Interested Ma	ijor:			Have you been accept	ted?

Separate application required for each project area in which you are applying.

## **Project Area Application**

	area you are applying for. You may apply for more than one project area; however, a st be submitted for each area. The Projects listed below have funding available for
General	How many years have you been involved in this project?
Horse	How many years have you been involved in this project?
Large Stock	How many years have you been involved in this project?
Small Stock	How many years have you been involved in this project?
types of entries/exhibits,	our project(s) work in the above project area. Make sure to include the number of years, special project activities, and average number of events per year, only in the project or not enter for other project areas.
Describe how being invo	olved in the above project area has helped you personally:
AWARDS AND/OR 4-H List awards of special are	HACHIEVEMENTS  eas of academic and/or 4-H achievements during your participation in this project area:

<u>SERVICE AND/OR LEADERSHIP</u> List all memberships in school and community activities (including organizations such as 4-H, FFA, Student
Council, etc.) during your participation in this project area. Include offices held and committee responsibilities
List your community service activities during your years of participation in this project area?
WORK AND/OR VOLUNTEER EXPERIENCE List your work and/or volunteer experience(s) during the years of participation in this project area. List name of business, description of duties, length of employment, and average hours per week. Include self-employment or family-employment, if applicable:
FUTURE PLANS AND GOALS  Describe your career/educational goals and how receiving this scholarship will help you reach them:

# ALL DECISIONS OF THE SCHOLARSHIP JUDGING COMMITTEE ARE FINAL. NAMES OF WINNERS WILL BE PUBLICIZED IN 4-H E-NEWSLETTER AND ON SOCIAL MEDIA.

	all the information in the application is accurate a ation does not guarantee you a scholarship and awanmittee and 4-H Extension Staff.	-
Member's Printed Name	Member's Signature	Date
Parent's/Guardian's Printed Name	Parent's/Guardian's Signature	Date
Leader's Printed Name	Leader's Signature	Date

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