THE UNIVERSITY OF ARIZONA
Cooperative Extension
Maricopa County

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: Amount Requesting: $ _____

Cost of Camp or Activity:

Date of Camp or Activity: _____ Did you participate in a TSC Event? (Date?): _____

Why do you want to attend this camp or leadership activity?:

_____
Parent Signature *Date*

_____
County Extension Signature *Date*

For State Office Use Only

Approved Amount: _____

_____
State Extension Signature *Date*

Date Funds sent:

Issued in furtherance of Cooperative Extension work, acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, Jeffrey C. Silvertooth, Associate Dean & Director, Extension & Economic Development, College of Agriculture Life Sciences, The University of Arizona.
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