## TWIN FALLS COUNTY 4-H LEADERS COUNCIL YOUTH <u>ACTIVITY</u> SCHOLARSHIP CHECK LIST

- 1. Complete the two-page scholarship application. Applications must be submitted before the activity you wish to attend takes place. Scholarships will not be awarded retroactively.
- 2. Submit your application by the 3rd Tuesday of the month.
- 3. a. Bring your application to the TF County Extension office (630 Addison Avenue West Ste 1600, Twin Falls) or
- 4. b. Email it to Jamie Thorne @jthorne@uidaho.edu
- 5. Attend the Leaders Council meeting (3rd Thursday of the month, 7:00 p.m., County Extension Office) to request your scholarship. Be prepared to explain the activity and your reasons for wanting to attend.
- 6. If you receive a scholarship, you will be required to return to Leaders Council and report on your event. Plan to share specific details about what you gained from the activity.
- 5. Complete and mail two thank you cards.
  - a. Leaders Council

P.O. Box 5763

Twin Falls ID 83303

b. Florence Gartner Foundation
 Pamela Hartley/Gardner Trust
 P.O. Box 5279
 Twin Falls, ID 83303

Please note that only a percentage of the total cost of an event will be awarded; Council scholarships are given as just one part of the fundraising effort expected for an activity and very rarely cover the entire cost.

## TWIN FALLS CO. 4-H LEADERS COUNCIL YOUTH ACTIVITY SCHOLARSHIP APPLICATION

\*You must be present at the Leaders Council Meeting\*

Date:		
Name:		Age: Age as of Jan. 1
Address:	City:	St Zip:
Phone Numbers: Home	Cell	
4-H Club Name:		Years in 4-H:
answer):	er of years participated (Please indica	te if using a separate piece of paper to
Event Attending:		
Date of Event:	Cost of Event:	
Amount Requesting:	Have you attended Event befo	ore: Yes/ No When:
Other scholarships and/or a	nmounts you are requesting/receiving	:
Your plan to make up the re	est of the money:	
*******	*Annlication continues onto hackside a	of paper. ***************

Please use a separate piece of paper to answer the next two questions.

1. Explain why you would like to go and what you hope to gain from this experience.

2. Following this activity, tell us how you will share or implement the ideas and information gained by your attendance of this activity so it will contribute to the 4-H program or the County?

The applicant is required to come to the Leaders Council meeting in person or via zoom to request funds and report back after the event.

The undersigned verifies that the application has been prepared by the applicant.

Signature of 4-H member:	Date:		
Signature of Parent/ Guardian:			
Signature of 4-H Leader:	(Optional)	Date:	_
		Date Received:	
Approved: Yes/No Reviewed	l By:		_
Amount Approved:	Check #:	Line Item	