Livingston County Home and Community Education Association

\$1000 Youth Scholarship Application

NAME			DATE
ADDRESS			PHONE
CITY_			E-MAIL
SCHOOL			YEAR GRADUATED
			AGE
PARENT'S AD	DRESS		PHONE
CITY_		ZIP	
PARENT'S O	CCUPATION:	FATHER ·	
		MOTHER	
BROTHERS:	NUMBER	AGES	
SISTERS:	NUMBER	AGES	
	cation. One of t	he three letters MUST be	of recommendation should be included from someone other than a teacher.
1	<u>Name</u>	<u>Address</u>	Occupation
2			
3.			
			YesNo Where?
			& ACT or SAT score from your senior
year:	, ,		arter of ertr decre from your demon
What is your o	ccupational goal	?	
What is the tuit	tion per year?	No. 1 and 1 and 1	**************************
Shirley Meen	LUDE THE FOL en North Rd., For	LOWING AND RETURN F rest, IL 61741	BY MAY 31st TO:
□ Completed,□ 3 reference□ One page s	cial transcript <u>signed</u> applicati letters	ion ng the reasons you are ch	☐ Current photo attached cosing this career path and reasons you
******	******	**************************************	

CANDIDATES FOR THIS SCHOLARSHIP MUST BE INTERVIEWED IN PERSON IN THE EVENING ON THE THIRD MONDAY OF JUNE. RECIPIENTS WILL BE NOTIFIED AFTER JULY 1ST AND ASKED TO ACCEPT THE SCHOLARSHIP AT THE 4-H FAIR ON WEDNESDAY NIGHT. NO TELEPHONE INTERVIEWS.

Indicate any special honors received or extra curricular activities participated in thus far in high school or college:

IIGH SCHOOL/ COLLEGE	OFFICES HELD	COMMITTEE/PROJECT NUMBER OF YEARS
		NUMBER OF TEAMS
CLUB, COMMUNITY,OR CH		
NAME		
SPECIAL HONORS RECEIV	ED	
The information provided is to	rue and correct:	
Signature of applicant and date	9	