

Clinton County 4-H Camp/Cloverbud Camp Scholarship Application

Please complete this application form and return it to the OSU Extension Office, 111 S. Nelson Avenue, Suite 2, Wilmington, OH 45177 for consideration of a full or partial 4-H camp scholarship.

Due May 19, 2008 for 4-H Camp and June 2 for Cloverbud Camp

Date _____

Family Information

Applicant Name _____

Address _____ Phone _____

Street _____ City _____ State _____ Zip _____

Age _____ School _____ Grade _____ 4-H Member _____ Yes ___ No ___

- Father's/Guardian name & address: _____

Employer _____ Monthly Income _____

- Mother's/Guardian name & address: _____

Employer _____ Monthly Income _____

* Number of Brothers: _____ Ages: _____

• Number of sisters: _____ Ages _____

• How many from your household will be attending college or trade school during the next year? _____

• Where? _____

• Does the applicant receive free or reduced lunch at school? ___ Yes ___ No

• Does the applicant's family receive Tanif? ___ Yes ___ No Amount _____

• Child support? ___ Yes ___ No Monthly Amount _____

• Food stamps? ___ Yes ___ No Monthly Amount _____

• Ohio Works 1st? ___ Yes ___ No Monthly Amount _____

• List name and amount of any other scholarships already received for coming year:

_____ \$ _____

_____ \$ _____

_____ \$ _____

Amount of scholarship requested? \$ _____

Have you received a 4-H Camp Scholarship in the past? Yes No
If yes, in which year(s) did you receive it?

Please explain below your need for financial assistance for 4-H camp.