

Applications Due to the Lyon County Extension Office by April 1

ISU Lyon County Extension • 710 N 2nd Ave E • Rock Rapids, Iowa 51246 • Phone: 712-472-2576

Lyon County 4-H scholarship offers financial support to outstanding Lyon County 4-Hers attending a college, university, technical or other higher education institution.

- 1) Applicants must be a graduating senior enrolled in the Lyon County 4-H Program planning to pursue a post high school education.
- 2) Applicants must have been a member of the Lyon County 4-H program for a minimum of 3 years and a current 4-H member as Senior in High School.
- 3) Recipients will receive the Scholarship for the 2nd semester of their post-high school education year.

| Name First | Last | | Birth date | |
|------------------------|--------------------|----------------------|-------------|---|
| Address Street | City | Zip | () Phone | |
| High School | | | | |
| Parents' Names | | | | |
| School(s) to which you | have been accepted | | | - |
| Number of years in 4-H | Are you cu | rrently an active 4- | H member? | |
| Name of 4-H Club | | | | |

| 1. Describe your 4-H highlights (Offices held in 4-H, community & volunteer work, presentations given, civic engagements) | | | | | | |
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| 2. Tell us about ONE Project Area you focused on during you 4-H career and it's impact. | | | | | | |
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| 3. Why would you encourage other young people to join 4-H? | | | | | | |
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This institution is an equal opportunity provider. For the full non-discrimination statement or accommodation inquiries, go to www.extension.iastate.edu/diversity/ext.

| 4. What sk | ills have you gained in 4- | H? How will they be | nefit your future? | |
|----------------------|--|-----------------------|------------------------|----------------|
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| 5. What im | pact has 4-H had on you | r educational, career | or personal goals? | |
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| 6. Of the 4 and why? | H's, head, heart, hands a | nd health, which one | e is most important to | you personally |
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| | | | | |
| Signature o | of applicant | | _ Date | |
| Signature of | of Club Leader ach a letter of recommen | | Date | |
| **Must atta | ach a letter of recommen | dation from your Clu | ıb Leader** | |

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