	SCHOLARSHIP APPLICATION
Child's Name:	Child's Birthday:
Additional Children t	o be Considered:
Name of Parent or G	uardian(s):
	(List only those with which the child lives)
Mailing Address:	
Phone Number:	Email Address:
School Attending:	Grade Completing:
Has your child been i	nvolved in 4-H? If so, please describe involvement.
Average monthly inc List all members of th	Id's source of income? Please list all sources including any assistance.
FULL camp scholarsh commitment from th the 4-H Camp fee?	ips are NOT offered. Scholarships are only offered in partial amounts to have some le family and to help more families. How much do you feel you can pay per child toward
	about 4-H Camp and the scholarships available?
	ibling to this child) previously received a 4-H Camp scholarship? Yes No
If so, how many 4-H	Camp Scholarships have been awarded to this family in previous years?
Parent Signature:	Date:

PAGE TO BE COMPLETED BY YOUTH	Date submitted:
	Deposit Amount Paid: Amount Awarded:
Why do you wish to attend camp?	
Have you participated in other Taylor County 4-H activities, clu	bs, workshops/etc.? Please list below:

4-H'er Signature:

Date: _____

Office Use

4-H camp Scholarships are allocated through a non-biased committee. No scholarships given are full-ride scholarships, only partial scholarships will be provided. Recipients must write a thank-you note to a donor if selected. Priority is given to first time applicants. Contact the Taylor County Extension Office with any questions you may have at (270) 465-4511.

> Return to: Kimberly Thomas Taylor County Extension Office 1143 South Columbia Avenue Campbellsville KY 42718

Or email to Kimberly.Thomas@uky.edu

*DEADLINE TO APPLY: April 19, 2024

Educational programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental disability. University of Kentucky, Kentucky State University, U.S. Department of Agriculture, and Kentucky Counties, Cooperating.



Cooperative Extension Service Agriculture and Natural Resources Family and Consumer Sciences 4-H Youth Development Community and Economic Development

LEXINGTON, KY 40546