2024 DEKALB COUNTY EXTENSION HOMEMAKERS SCHOLARSHIP GUIDELINES

This scholarship is sponsored by the DeKalb County Extension Homemakers Organization. Up to three scholarships will be awarded at a minimum of \$500 each (for tuition only).

- 1. The Applicant must be a resident of DeKalb County or a member of DeKalb County 4-H
- 2. The Applicant must be:
 - a. a current member for 2 or more years in the DeKalb County Extension Homemakers, AND/OR
 - b. a child or grandchild (stepchild or step-grandchild) of a current member for 2 or more years in DeKalb County Extension Homemaker, **AND/OR**
 - c. a member of the DeKalb County 4-H, minimum of 5 yrs. membership, AND/OR
 - d. a current 4-H leader with 2 or more years of service.
- 3. The Applicant must have been accepted to attend an accredited college, university or vocational school.
- 4. The Applicant must have a high school diploma or G.E.D. and have maintained a "C" average. High school applicants must include a copy of your high school grade transcript with application. Adult applicants must include a copy of your most recent transcript high school, vocational school or college transcript with application.
- 5. If the Applicant is a member of 4-H, you must provide a copy of your official 4-H record (from the Extension Office) with the application.
- 6. The Applicant must have two (2) Reference Sheets filled out by non-relatives, and included with the application.
- 7. The Applicant must submit a one-page typed (200 word minimum) essay answering this question: *"Why did you choose your course of study and what are your future plans?"*
- 8. If chosen, the Applicant must furnish date needed, address of Scholarship Office of college or school, and your student ID. Scholarship will be mailed directly to the school.
- Application with Signatures, Transcript, one page about career choice and future plans, and References must be received in the DeKalb Co. Extension Office (or postmarked) by <u>MARCH 1</u>:

DeKalb County Extension Office Attn: Ext Hmkrs Scholarship Committee 215 E 9th Street, Suite 300 Auburn IN 46706

2024 DEKALB COUNTY EXTENSION HOMEMAKERS SCHOLARSHIP APPLICATION

		Date		
Name		Telephone		
Ad	ldress			
	ty			
Em	nail Address			
	our place of employment (if any)			
Do	o you have a parent/grandparent curre	ntly a member of Del	Kalb County Ex	xtension
Ho	omemakers? Name of Homemaker			
Na	ame of 4-H Club or Extension Homem	aker Club that you ar	e a member o	f:
Cl	ub			
١.	Course of Study			
2.	Career Choice			
3.	Choice of College or Vocational Scho	ool		
4.	Have you been accepted for admittan	ice to this school?	YES	NO
5.	List your involvement in school, chur	ch, community, organ	izations, etc.	
			Applicant Signatur	

4-H Leader or President of Extension Homemaker Club

REFERENCE SHEET

(All References Will Be Held Confidential)

Reference for:					
NAME					
ADDRESS					
In what capacity have you known the Applicant?					
Applicant's Teacher	4-H Leader				
Family Friend	Employer				
Counselor	Other				
Advisor / Coach					

Ι.

2. Please explain why you think this Applicant should be selected to receive the DeKalb Co. Extension Homemakers Scholarship. You can use a separate piece of paper, if needed.

REFERENCE SHEET

(All References Will Be Held Confidential)

Reference for:					
NAME					
ADDRESS					
In what capacity have you known the Applicant?					
Applicant's Teacher	4-H Leader				
Family Friend	Employer				
Counselor	Other				
Advisor / Coach					

Ι.

2. Please explain why you think this Applicant should be selected to receive the DeKalb Co. Extension Homemakers Scholarship. You can use a separate piece of paper, if needed.

(Please place in sealed envelope and return to Applicant to be attached to their application)

ESSAY: (Minimum of 200 words)

Why did you choose your course of study and what are your future plans?