



Four Leaf Clover Foundation

College/Vocational Scholarship Application

Submission Deadline April 22

To: Scholarship Applicant

As a graduating high school senior, or equivalent, and a member of the Santa Barbara County 4-H program you are eligible to apply for a scholarship award from the Four Leaf Clover Foundation, a nonprofit public benefit corporation whose mission statement is "To enhance, encourage, and support youth development through the Santa Barbara County 4-H program".

Applicants must:

- Be a current 4-H member in good standing
- Be enrolled in one of the Units of Santa Barbara County
- Mail or email (preferred) the completed Scholarship application packet to the address below, and postmarked no later than April 22. Letters of recommendation must also be sent no later than April 22.

Application Checklist

Application complete and signed by applicant, parent or guardian, and 4-H Leader. (This is a PDF form that can be filled out on your computer or phone with the proper app.)

Attach a resume and 4H story that describes your 4-H experience with emphasis on your participation and skills learned in various projects. **Include leadership roles and involvement in county, state and national 4-H events.**

Arrange for 2 [Letters of Recommendation](#) (Download from web site)

- (1) A letter from a Community Leader or Leader from another Unit, and
- (2) A letter from an individual who is familiar with your leadership and service learning activities

Before the April 22 deadline,

Email signed and scanned application and/or [letters of recommendation](#) to scholarhips@4lcf.org

OR

Mail application to:

Four Leaf Clover Foundation - Scholarship Committee
P.O. Box 451
Los Alamos, CA 93440-0451

If you have any questions concerning this application, send an email to scholarships@4lcf.org.

Scholarships to be awarded are based on:

- Active 4-H participation
- 4-H Leadership
- Citizenship, community service, and service-learning accomplishments

Scholarships are awarded at the discretion of Four Leaf Clover Foundation in amounts up to \$2000.

Scholarship awards will be paid directly to the recipient (may be taxable) or to the school (not taxable) at the recipient's request upon receipt of evidence that the recipient has enrolled in a course of further study



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Name

Permanent Address

City/State/ZIP

Birth Date

Daytime/Cell Phone

Evening/Home Phone

Email

Age

Parent/Guardian's Name

Parent/Guardian's Name

How did you hear about this scholarship?

4-H Unit Name

Year Joined 4-H

Years in Santa Barbara County 4-H

Total Years in 4-H

Major Projects

Name of High School

Date of (expected) high school graduation (month & year)

Intended enrollment at college, university, trade school

Major

CERTIFICATE

I certify that all information on this application is true, complete, and accurate to the best of my knowledge. I will be a full-time student during the next school year. I authorize public acknowledgment of any scholarship I receive.

Applicant's Signature: _____ Date: _____

I have reviewed this application for a Scholarship administered by the Four Leaf Clover Foundation and I believe that the information contained is correct.

Parent/Guardian's Signature: _____ Date: _____

I have reviewed this application for a Scholarship administered by the Four Leaf Clover Foundation and I believe that the information contained is correct. I also certify that the above applicant is a Santa Barbara County 4-H member that has been in good standing throughout their high school career, and is currently still in good standing.

Community Leader's Signature: _____ Date: _____