

# FLCF 4-H SERVICE LEARNING SCHOLARSHIP

Four Leaf Clover Foundation www.4LCFoundation.org

Submission Deadline April 30th

\$1000 Scholarship Award

To: Scholarship Applicant

As a graduating high school senior, or equivalent, and a member of the Santa Barbara County 4-H program you may be eligible to apply for the FLCF 4-H Service Learning Scholarship award. This scholarship is administered by 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".

### Information

The FLCF 4-H Service Learning Scholarship was founded February in 2006 by the Four Leaf Clover Foundation and is awarded to an individual who is dedicated to service and making an active difference to overcome the needs in their community.

The application, qualifications, instructions and reference forms are enclosed. Read the qualifications and instructions carefully to determine your eligibility. Please return your completed application directly to the address below. The Letters of Recommendation should be sent to this same address.

### Qualifications

The scholarship was established for 4-H members who exhibit strength in service learning, have earned their gold star, and plan to continue their education at a college, university, or technical school. Financial need is not a consideration for this scholarship. 4-H members may apply for additional FLCF scholarships, if qualified, but only one will be awarded per applicant.

Applicants must:

- Have been in the 4-H program all of their years in High School,
- Be a current member in good standing in a 4-H club in Santa Barbara County
- · Have received or will be receiving this year the rank of Gold Star
- Mail the completed Scholarship application to the address below, and post marked no later than April 30<sup>th</sup>.
- Letters of recommendation must also be post marked no later than April 30<sup>th</sup>.

## **Application Checklist**

Application complete and signed by applicant, parent, and 4-H Leader

Arrange for 2 'Letters of Recommendation' (Use form included with this application)

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

Attach photocopies of your 4-H Personal Development Report. This year's PDR completed to-date (Including 4-H Story) signed by parent/guardian and 4-H Leaders. All pages must accompany the completed application. Must use most recent California PDR long form.

Mail application before April 30<sup>th</sup> deadline to: Four Leaf Clover Foundation - Scholarship Committee P.O. Box 451 Los Alamos, CA 93440-0451

If you have any questions concerning this application or the FLCF 4-H Service Learning Scholarship in general, please contact Zelda Hughes (805-967-3659) or Linda Greco (805-934-3490).



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## Letters of Recommendation

- (1) Provide one current letter of recommendation from a Community Leader or a Leader from another 4-H club.
- (2) Provide another current letter of recommendation from an individual who is familiar with your service learning activities.

A parent, sibling, relative, or another 4-H member may **not** be used as a reference. Use the enclosed form. The letter **may not** accompany the scholarship application. Give your reference writer adequate time to write your letter by the April 30<sup>th</sup> post marked deadline.

## Selection

Selection is based on dedication to service learning and making an active difference in your community. The Scholarship Selection Committee (composed of three or more Directors of the Four Leaf Clover Foundation) meets in May to review applications. The recipient's name will be announced at County Exhibit Day and he/she will be notified directly. If possible, the reward will be presented at the recipient's high school awards ceremony.

### Funding

Scholarship monies will be available to the recipient named by the Selection Committee upon verification of enrollment to an educational institution of his/her choice. It is the recipient's responsibility to provide proof of that enrollment to the address below.

Any recipient of Scholarship monies not completing his/her first semester or other term of work at the institution of his/her choice is required to return the money, in its entirety, to the Four Leaf Clover Foundation, within 60 days of the discontinuance, through the Foundation Treasurer. The EXCEPTION, in the discretion of the Four Leaf Clover Foundation, is when special circumstances apply and approval by the Four Leaf Clover Foundation Scholarship Committee is granted.

APPLICATION AND LETTERS OF RECOMMENDATION ARE DUE: Post marked no later than April 30<sup>th</sup>.

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

	over Foundation Scholarship Common Application
	ar of to SUBMISSION DEADLINE APRIL 30TH
Check the box of all scholarships applying for	r: 🗆 Brian Worker 🖾 George Hughes 🖾 Service Learning 🖾 Jackpo
Name	Male Female
First Middle Initial Permanent Address	Last
City/State/Zip	Birth date:
Daytime Phone ()	
E-mail:	Age:
Father's Name:	Mother's Name:
Are you or your parents Four Leaf Clover Fou	undation Members? If yes, what years?
How did you hear about this scholarship? _	
4-H Club Name	
Years in 4-H (in Santa Barbara County)	
Years in 4-H (total)	Year joined 4-H:
Major Projects	
High School Name	
When will you graduate from high school (Mo	onth & Year)
For further education you plan to attend	
Malar	(College, University, Technical School, etc.)
Major	CERTIFICATE
	ue, complete, and accurate to the best of my knowledge. I will be a full
time student during the next school year. I authori	ize public acknowledgement of any scholarship I receive.
Applicant's Signature:	Date:
	administered by the Four Leaf Clover Foundation and I believe that the the above applicant is a Santa Barbara County 4-H member that has been eer, and is currently still in good standing.
Applicant's Parent's Signature:	Date:
4-H Leader's Signature: (other than parent)	Date:
Bev: 2/12	0



Applicant's Name

Date:

The Four Leaf Clover Foundation appreciates your willingness to comment on the applicant's strengths in service learning, motivation, and potential for success. A parent, sibling, relative, or another 4-H member may **not** be used as a reference. Please fill out legibly in ink or type.

Please return this letter to the Scholarship Committee at the address below and not to the applicant. This letter is due (post marked not later than) April 30<sup>th</sup>.

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

Please list or describe significant situations of citizenship and community service in which this 4-H member excels:

Overall Ratin	g: Strongly Recommend	Recommend	_ Recommend with Rese	rvation
Signature			Date:	
Title			Phone number	
4-H Club			_	
Rev: 2/12				Л



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Overall Rating: Strongly Record	nmend Recommend Recommend with Reservation	
Signature	Date:	
Title	Phone number	
4-H Club		