

Hancock County 4-H Camp Scholarship Application

Date Due: April 15, 2025

Applications must be COMPLETE for Scholarship consideration. This includes the ADVISOR comments and signature.

Name: _____

Parent Phone: _____ Email: _____

Address: _____
Address City State Zip

Birthdate: _____ Age as of 1/1/2025: _____ Grade in School: _____

4-H Club: _____ Total number of years in 4-H: _____

Number of children in my family attending *Hancock County 4-H Camp* this year (including myself): _____

Number of years I have attended 4-H Camp: _____

Parents/Guardian name(s): _____

Father's Occupation: _____

Mother's Occupation: _____

Camp interested in attending: _____ Hancock County 4-H Camp

_____ 4-H Shooting Sports Camp

List activities in which you have participated in as a 4-H member such as:
Local Club Work, Demonstrations, Interview Judgings, Community Service, Hancock County Fair, State Fair, Camps, etc.

Describe your participation in Church, School and/or Community Activities: _____

I have assumed responsibility in my local club this year by: _____

Please answer the following statement:

“What 4-H Means To Me”: _____

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To be filled out by Advisor:

Must be signed by applicant and 4-H Advisor to be considered by the Hancock County 4-H Committee.

Additional Comments: _____

Applicant's Signature _____

Advisor's Signature _____

***The following can be emailed by Parent/Guardian to Lauren at burner-kitzler.1@osu.edu and will remain confidential. Please advise of any circumstances which need additional consideration. (i.e.: qualify for school lunch assistance, single parent, job loss, live with grandparents who have fixed income, etc.) Include your name, relationship to child, child's name and their birthdate.*

4-H Educator Approval: _____