

# Kennedy Columbus Memorial Leadership Scholarship Form

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## Clinton County 4-H

*New York State 4-H Leadership Trip Scholarship Application*

**Deadline for applications is May 1<sup>st</sup>**

### Applicant Information

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Years in 4-H: \_\_\_\_\_

4-H Club (if applicable): \_\_\_\_\_

### NYS 4-H Leadership Event (please circle):

NYS Capital Days                      Career Explorations                      State Teen Action Retreat (STAR)

Event Date(s): \_\_\_\_\_

Total Cost of Trip: \$ \_\_\_\_\_

Amount of Scholarship Requested: \$ \_\_\_\_\_

### Short Response Questions

1. Describe your involvement in Clinton County 4-H. (Include projects, leadership roles, committees, community service, and events.)

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2. What does leadership mean to you, and how have you demonstrated leadership in 4-H or your community?

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**Parent/Guardian Acknowledgment**

I understand my child is applying for the Kennedy Columbus Memorial Leadership Scholarship and agree to support their participation if awarded funding.

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Optional 4-H Leader/Educator Recommendation**

Leader Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

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