

**2025 Johnson County Ambassador Scholarship Application Form**

4-H Discovery Days (June 4-6, 2025)

**Deadline:** **Monday, May 12th, 2025, 5:00 PM**

Scan and email to Lexi.Ray@jocogov.org or drop off/mail to the Johnson County Extension Office

(11811 S. Sunset Dr., Suite 1500, Olathe, KS 66061)

**The Johnson County 4-H Ambassadors are excited to have the opportunity to create scholarship opportunities for our Johnson County 4-H’ers to encourage them to attend state 4-H events. The scholarships are in the amount of $50 each and will be refunded to the recipient after they have attended the event.**

Make sure all the following are completed in order to be eligible for consideration for receiving an Ambassador scholarship for 4-H Discovery Days:

1. **Register** for 4-H Discovery Days on the State 4-H website.
2. Ask a 4-H Leader to complete and mail the **Recommendation Form** to the Extension Office by the deadline.
3. Submit this **Scholarship Application** to the Extension Office by the deadline.

**General Information:**

4-H’er Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years in 4-H: \_\_\_\_

Age (before 1/1/25): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4-H Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you attended this 4-H event before? Yes\_\_\_\_ No\_\_\_\_ If yes, what years? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*What other 4-H events have you attended?

Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

Event: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Year(s): \_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Has the 4-H’er received a 4-H scholarship in the past? Describe: |
| Please provide an explanation of your financial need: |

**The following questions should be answered by the 4-H’er:**

1. Why do you want to attend Discovery Days and what do you hope to gain from the experience?

2. How have you given back to the community through 4-H? (This can be community service and/or giving back to your peers in your club.)

3. After attending this event, how do you plan on using the skills and lessons you learned to take leadership in your club, community, county, etc.?

*By signing below, you affirm that all information provided in this application is correct.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

4-H Member Signature Parent/Guardian Signature Date

4-H Leader Recommendation

2025 Johnson County Ambassador’s Scholarship for 4-H Discovery Days

Dear 4-H Leader: Thank you for taking time to complete this form. ***Please return by 5:00 PM on Monday, May 12h, 2025***. Scan and email to Lexi.Ray@jocogov.org or drop off/mail to the Johnson County Extension Office (11811 S. Sunset Dr., Suite 1500, Olathe, KS 66061). The application will not be complete for consideration without this form.

Scholarship Applicant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4-H Leader Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To be completed by 4-H Club leader. Please rate the following items on the above named 4-H member with regard to your evaluation as an applicant for a 4-H Discovery Days scholarship.

 Please use the following scale: E=Excellent, G=Good, F=Fair, P=Poor

1. Club member in good standing\_\_\_\_\_\_

2. Completes projects\_\_\_\_\_\_\_\_\_\_

3. Is responsible and has good follow-through\_\_\_\_\_\_\_

4. Leadership skills\_\_\_\_\_\_\_

 Examples of leadership:

5. 4-H participation\_\_\_\_\_\_\_

6. Representation of 4-H\_\_\_\_\_\_\_\_

7. Overall assessment\_\_\_\_\_\_\_\_\_\_

8. Please explain why this applicant deserves to be considered to receive a Discovery Days scholarship.

The information on this recommendation is true and correct to the best of my knowledge.

 Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicants will not be considered until this form has been received. If you have any questions, please call Lexi Ray at 913-715-7026, or email Lexi.Ray@jocogov.org anytime. Thank you!

