KAREN MACLEOD MEMORIAL 4-H SCHOLARSHIP

Established 2014

CRITERIA

Eligibility Requirements:

- 1. Be a 4-H member in Carroll County
- 2. Be a graduating senior of high school graduate
- 3. Be accepted at or already attending college or post secondary school.
- 4. Must have exhibited sheep OR horses at the Carroll County 4-HIFF A Fair for at least one year.
- Must comply with current record keeping requirements for the Carroll County 4-HIFFA Livestock Sale.
- 6. Will to volunteer 1 day at horse show to help raise money for the next year.

Selection will be based on:

- 2. 4-H accomplishments, participation, financial need, and high school grades
- 3. Applicant must furnish a transcript of high school grades.
- 4. Applicant must furnish two letters of recommendation.
- 5. Applicant must submit a senior record book/portfolio along with the application to be considered for this scholarship. The senior portfolio/record book may represent records submitted any year since their 4-H age became 14. A copy is ok to send of portfolio.
- 6. Decision of the Selection Committee will be final.
- 7. Applicants may be interviewed.
- 8. The Selection Committee may decide not to award a scholarship if there are no worthy applicants.

This scholarship may only be awarded once to each individual.

Recipient will be recognized at the 4-H Livestock Sale at the Carroll County 4-HIFF A Fair.

Completed applications, grade transcripts, and record book/portfolios are due to the Carroll County 4-H Office by July1,

. Applicants will be notified of the interview schedule.

Applications are available from: Carroll County 4-H Office, 700 Agriculture Center, Westminster
Carroll County High School Guidance Offices
Community Foundation of Carroll County



KAREN MACLEOD MEMORIAL 4-H SCHOLARSHIP APPLICATION

Name HomePhone	(as of January
Birth Date Age (Do you live in Carroll County? Yes No If yes, how long Are your parents Carroll County residents? Yes No Parent's Names: Mother Occupation Fmher Occupation Brother(s) Name Siblings: Name Name Name High School and College Information	(as of January
Birth Date Age (Do you live in Carroll County? Yes No If yes, how long Are your parents Carroll County residents? Yes No Parent's Names: Mother Occupation Fmher Occupation Brother(s) Name Siblings: Name Name Name Name High School and College Information	(as of January
Do you live in Carroll County? Yes No If yes, how long Are your parents Carroll County residents? Yes No Parent's Names: Mother Occupation Fmher Occupation Brother(s) Name Siblings: Name Sister(s) Name Name Name Name	
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Parent's Names: Mother Occupation Fmher Occupation Brother(s) Name Siblings: Name Sister(s) Name Name Name Name	
Occupation Fmher Occupation Brother(s) Name Siblings: Name Sister(s) Name Name Name	
Fmher Occupation Brother(s) Name Siblings: Name Sister(s) Name Name Name	
Occupation Brother(s) Name Siblings: Name Sister(s) Name Name Name	-
Brother(s) Name Siblings: Name Sister(s) Name Name High School and College Information	
Siblings: Name Sister(s) Name Name High School and College Information	-
Siblings: Name Sister(s) Name Name High School and College Information	Age
Name High School and College Information	Age
High School and College Information	Age
	Age
Anticipated Graduation Date	
Indicate your class in high school.	
Freshman Sophomore Junior Senior	

What type of ins	titution do you plan to attend (4 ye	ear colleg	ge, technical tra	aining, comr	nunity college, etc.)?
Have you been a Proposed~~or _	accepted at the above institution? Y		No		
	Live on Campus				
Do you plan to:	Commute to College from home				
	Other (specify):			_	
I will be a:	Full time undergraduate student (12 or mo	re semester ho	urs)	
	Part time undergraduate student (6-11 sen	nester hours)		
What will be yo	ur estimated first year's expenses?		\$		
Are you applyin	g for other scholarships?	Yes	No	2	<u>W</u> ,.,;'! ,.
Have you been a	accepted for other scholarships? Ye	es	No		
	4-H (Submit a copy of your 4-H R cts (give number of years):	esume o	r fill out the in:	formation sh	neet)
Major 4-H awar <u>Year</u>	ds received: Type of A ward		For What Rec	ceived	

List your participation in demonstrations, talks, exhibits, and television appearances, newspaper articles written, tours, workshops, camps, judging events, field trips or other learning experiences:	
List 4-H offices you have held and committees on which you have served (club, county, district, state):	
Year Office Responsibility	
List your volunteer leadership participation in 4-H: Year Kind of Activity Size and Scope of What You Did	

Applicants Signature

Date

Submit with this Scholarship Application:

- Current Transcript of Grades
 - Two letters of recommendation
 - Senior record book/portfolio

Submit to:

KAREN MACLEODScholarship Committee

Carroll County 4-H Office 700 Agriculture Center Westminster, MD 21157

Application Deadline:

July1

It is the policy of the Maryland Cooperative Extension that no person shall be subjected to discrimination on the grounds ofrace, color, gender, religion, disability, age, or national origin.