BURNET COUNTY 4-H AG/NR ACHIEVEMENT SCHOLARSHIP in Honor of WADE HIBLER

Please accept my application for the Burnet County 4-H AG/NR Achievement Scholarship in honor of Wade Hibler:

NAME:		
ADDRESS:		
TELEPHONE:	EMAIL:	
The criteria listed below explains that I ar	m eligible for the Award/Scholarship (no pages	added):
	4-H club for yettivities that explain my level of involvement in	
	different activities that explain that I am activ and/or the County 4-H Ambassador group:	e member
of the burnet county 4-ri council a	and/or the county 4-11 Ambassador group.	
3. I have been accepted to	(higher educatio	nal
institution) and listed below are m		

PROJECT DEVELOPMENT:

1.	Listed below are the projects (at least three) I have maintained throughout my 4-H career with an explanation of my level of involvement. (List by year with current year first).
2.	Listed below is (are) the 4-H Record Book(s) I have completed and turned in for county competition: (Note: must have completed a 4-H record book during the 2015-2016 4-H club year to be eligible for this Award/Scholarship)
3.	I applied and interviewed for the County 4-H Gold Star Award in the following year(s).

COMMUNITY SERVICE/CITIZENSHIP:

	. Listed below are the community service/citizenship activities (at least 4) in which I have participated. (L=Local, C=County)	
PROMO	OTION:	
1. L	isted below are at least 4 different times I have promoted and/or marketed 4-H programs.	

LEADERSHIP:

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1.	Listed below are at least 4 different elected and/or appointed positions of leadership that have held during the past 5 years.				
2.	Listed below are at least 4 examples of 4-H leadership other than elected/appointed positions.				
3.	Listed below are the County and/or District 4-H offices I have sought and/or been elected to:				

APPLIC	CATION PACKET CHECKLIST:			
	Completed & signed application			
	Official Transcript with ACT and/or SAT scores Black & White Copy of 2015-2016 Texas 4-H Record Book			
	one from County Extension Agent or 4-H Cluber, employer, or community leader			
Signat	ures:			
Parent	t or Guardian	Student Applicant		
 Date				