

WALLA WALLA COUNTY CATTLEMEN'S

YOUTH SCHOLARSHIP APPLICATION

- Ms.
Mr.
1. Applicant's Name Miss _____ Social Security No. _____
Last First Middle Initial
- Current Mailing Address _____
Street City State Zip
2. Parent or Guardian _____
- Mailing Address _____
Street City State Zip
3. High School _____ Graduation Date _____
Name City
4. Please identify WWCCA family member and relationship to applicant _____

POLICY:

The WWCCA Youth Scholarship will provide for tuition assistance at your chosen college. Scholarship(s) will be awarded solely for proven leadership abilities and academic potential. Financial need is **not** a requirement.

Application deadline is March 31. WWCCA will notify the scholarship recipient of the amount awarded by May 1.

ELIGIBILITY REQUIREMENTS:

- Applicants must submit application and transcript from high school or evidence of successful completion of the GED examination.
- Must be able to demonstrate leadership abilities and have scholastic potential.
- Must be from a family who is a voting member of WWCCA.
- Must have two character evaluations by high school counselor, principal, teacher, or former employers.
- Previous recipients of this scholarship are ineligible for one year.

APPLICATION PROCEDURES:

Scholarship application forms may be obtained from the Walla Walla County Cooperative Extension office, 328 W. Poplar, Walla Walla, WA 99362.

Applications must be submitted to the Walla Walla County Cooperative Extension office (Attn: Cattlemen's), at above address.

Applications must be submitted by March 31 and include the following:

- a. Application Form
- b. Two Completed Reference Forms
- c. High School or College Transcript...

WWCCA Scholarship Application

CHARACTER EVALUATION

NOTE TO STUDENT: Have two people complete separate copies of this evaluation form. These references must not be relatives.

NOTE TO EVALUATOR: We would appreciate your observations and opinions about the applicant in the following areas. Your evaluation will be given considerable attention by the selection committee. Please be as specific as possible. *This information will be treated in a confidential and professional manner.*

APPLICANT'S NAME _____

COOPERATION: Consider willingness and ability to work with people in various capacities.

INITIATIVE, INDUSTRY: Consider resourcefulness and ingenuity.

JUDGEMENT AND COMMON SENSE: Consider ability and foresight in making everyday decisions.

LEADERSHIP: Consider ability to motivate a group of people in a desired direction.

PERSONALITY: Consider how the applicant interacts with people.

REALIABILITY: Consider dependability, willingness and honesty.

ADDITIONAL COMMENTS:

Signature of Reference _____ Title _____

DO NOT RETURN TO APPLICANT, MAIL DIRECTLY TO:

Walla Walla County Cooperative Extension Office
Attn: Cattlemen's
328 Poplar
Walla Walla, WA 99362

WWCCA Scholarship Application
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