Kitsap County 4-H Council
Special Event, Youth and Leader Scholarship Policy

1. Kitsap County 4-H youth can apply for a 4-H Leaders Council scholarship up to 40% of the cost of registration for WSU Extension 4-H sponsored events only. Examples include: Teen Rally, State Conference, Know Your Government (KYG), 4-H Day Camps, State and National 4-H Events, etc. A scholarship is not guaranteed. The total awarded amount is up to the discretion of the 4-H Leaders Council and based on available funding.

2. Scholarship forms must be submitted no later than 60 days prior to the event.

3. Special requests will be assessed on a case-by-case basis.

4. For any reason if a scholarship is awarded and the awardee does not attend event and it is after the deadline to cancel, the scholarship participants will be required to repay 100% of the awarded scholarship back to 4-H Leaders Council.

5. Those requesting a scholarship will be contacted about presenting to make an in person request at the 4-H Leaders Council meeting prior to the event.

6. Those receiving scholarships are required to make an in person presentation after the event. This report should include the event title and what they learned and enjoyed about attending this event. The in person presentation should be completed within 90 days of the event. Contact 4-H Council president to set up a presentation date.

7. Scholarship requests can be sent to WSU Extension by mail or hand delivered to the Extension office at 346 6th Street, Suite 550 Bremerton, WA 98370. Please address Attention: 4-H Council.

Updated February 2019
Kitsap County 4-H Council
Scholarship Request Form for Youth
This form must be competed and returned to 4-H Council via the WSU Extension
no later than 60 days prior to the event.

Name: ______________________________________________________________________________________________
Address: _________________________________ City: _____________________, WA  Zip: ________________________
Event Title: __________________________________________________  Date(s) of event: _______________________
Registration and Event Cost: $________________________________________________ ___________________________
Club Name:___________________________________________________________________________________________
Chaperones attending the event:_________________________________________________________________________

Please write a brief description of how this event/training will help you to apply the 4-H’s in 4-H.
HEAD: _____________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
HEART: ___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
HANDS: __________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
HEALTH: _________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Kitsap County 4-H Leader Council Action
☐ Approved for amount $___________
☐ Disapproved  Comments: ________________________________________________________________
☐ PRE/POST PRESENTATION DATE   MM/DD/YY________________________________________
Council Signature: _______________________________             MM/DD/YY____________
Name: _____________________________________________________________________________________________
Address: ___________________________________ City: _____________________, WA Zip: ________________________
Scholarship Requested for: __________________________________________________ Date(s): _________________
Total Registration Cost: $____________________________ Any other funds raised: $__________________________
Club Name:___________________________________________________________________________________________

Please write a brief description of how this event will enhance your 4-H program:
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________
______________________________________________________________________________________________________

Kitsap County 4-H Leader Council Action

☐ Approved for amount $___________
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☐ PRE/POST PRESENTATION DATE  MM/DD/YY_______________________________________

Council Signature: _______________________________ MM/DD/YY_________________