

## 2023-24 BROWN COUNTY 4-H EDUCATIONAL EXPERIENCE SCHOLARSHIP APPLICATION

The Brown County 4-H Leaders Association is offering the opportunity to apply and interview for a 40% scholarship for the educational experiences listed below. Youth members may apply for a scholarship to multiple educational experiences, but youth are only eligible to receive ONE scholarship for the 2023-2024 program year. If a member wishes to attend multiple educational experiences in one year, they must pay the full cost of the experience for all subsequent educational experiences. Families must notify the Extension Office that they have registered for an experience and intend to use their scholarship for that experience.

Youth approved for a scholarship will be asked to pay the remaining 60% up front and will have opportunities to participate in fundraisers throughout the year to earn back some or all of the 60% paid in. Only youth who have been approved through the scholarship program are eligible to earn back the 60% of program cost through fundraisers.

**Directions:**

- Before you fill out this application, read it thoroughly to become familiar with the information requested.
- Please use black or dark blue pen when completing this application. You can also complete this application online by visiting this link: <https://forms.gle/qAc4SeLYJBhRtbay8>
- Under the column **Experience Selection**, fill in the boxes  for each experience you are applying for.
- Under the column **Year of Prior Participation**, write the year(s) you attended any of the experiences listed.

Experience Selection	Educational Experience Name	Grade	Year of Prior Participation	*Approximate Cost
<input type="checkbox"/>	American Spirit Experience East	8-10		\$1650
<input type="checkbox"/>	Citizenship Washington Focus	10-12		\$1600
<input type="checkbox"/>	National 4-H Conference	10-12		\$1300
<input type="checkbox"/>	National 4-H Congress	10-12		\$1350
<input type="checkbox"/>	Summer Academy	7-10		\$450
<input type="checkbox"/>	Space Camp	6-8		\$900

\*Cost estimates are based on previous years' experiences. Final costs TBD.

**Section I: Member Information**

Name:		
Address, City, State, Zip Code		
Telephone Number:		
4-H Club:		
Birthdate:		
Age:		
Grade:		
Number of Years Completed 4-H Membership:		
Number of Years Completed Youth Leadership:		
I am a member in Good Standing:	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Section 2: Essay

On a separate paper, please write a statement that answers the following questions. Answers should be typed or written legibly, and be no more than 500 words. Attach the statement as the last page of your completed application form.

- Why do you want to participate in the educational opportunity you selected?
- What do you expect to learn from this opportunity?
- How will your participation in this educational experience benefit the Brown County 4-H Program?

## Section 3: 4-H Involvement

Please complete the following charts. Do not report the same thing on more than one chart. If something you want to report could be reported on more than one of the following charts, determine which chart is most appropriate.

4-H Leadership Positions: List all elected or appointed leadership positions you have held in 4-H. Include only those positions in which you were directly responsible for directing or motivating others. This could include but are not limited to: 4-H Club Officers, Camp Counselor, Junior Director, Club Event Chairperson, Activity Coordinator, etc.					
4-H Leadership Positions	Year(s)				What have you learned?

4-H Activities: List other 4-H sponsored educational activities you have participated in during your years as a 4-H member and specify if it was a club, county, state, or national event.					
4-H Activities	Year(s)				What have you learned or achieved?
Clothing Revue					
Community Service					
Drama					
Foods Revue					
Music					
Speaking Contest					
Youth Outreach					

Other (please list):					

**4-H Projects:** List all projects you have completed during the last 4 years. Include any accomplishments for the projects listed, such as county fair awards, state fair exhibits, new skills you have learned, etc.

4-H Projects	Year(s)				What have you accomplished?

**Community, School & Church Activities:** List your participation in clubs, teams, music, sports, and other activities you participate outside of 4-H through your community, church and school

Community, School & Church	Year(s)				What have you learned or achieved?

## Section 4: Recommendation Form

As part of your application, you are required to have two people complete a Recommendation Form. One person must be a 4-H Leader and the other must be a non-4-H person, such as a teacher, employer, minister, etc. Recommendations written by a relative of the applicant will not be considered. It is recommended that you provide a copy of the Recommendation Form (page 6-7 & 8-9) with an addressed stamped envelope to the people writing your recommendations at least two weeks before they are due in the Brown County 4-H Office. Forms also can be completed online at <https://forms.gle/ErWfNuXa2iX8XFV89>.

Return completed application and recommendation forms **by Tuesday, October 3, 2023**

to [4h@browncountywi.gov](mailto:4h@browncountywi.gov) or:

Brown County 4-H Office  
2019 Technology Way, Room#113  
Green Bay, WI 54311

## Section 5: Assurances *(please check to indicate completion)*

- The application is typed or handwritten legibly.
- I have signed the application
- My parent/guardian has signed the application
- I have attached the required essay
- I have asked a 4-H Leader to complete a Recommendation Form for me and provided a copy or link to the form. I am not related to this 4-H leader. The name of this person is: \_\_\_\_\_.
- I have asked a non-4-H Person to complete a Recommendation Form for me and provided a copy or link to the form. I am not related to this person. The name of this person is: \_\_\_\_\_.

\*Please Note: Interviews will be held **Tuesday, October 24, 2023, 5-9pm at the Brown County 4-H Office\***

### Member

I have prepared this report myself and believe it to be correct. If selected, I will participate in all pre-experience and post-experience required activities and fulfill all of the requirements established by the Brown County 4-H Leaders Association, Wisconsin 4-H and National 4-H programs.

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Date

### Parent/Guardian

I have reviewed this report myself and believe it to be correct. I will support my child in participating during and after the educational experience as required by the Brown County 4-H Leaders Association, Wisconsin 4-H and National 4-H programs.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

### 4-H Club Organizational Leader

Note: If the 4-H Club Organizational Leader is a parent, this form may be completed by another 4-H leader from the same 4-H Club or by a 4-H Organizational Leader from another club.

I have reviewed this application form. I have completed and submitted this member's recommendation form.

\_\_\_\_\_  
Signature of 4-H Leader (non-parent/guardian)

\_\_\_\_\_  
Date

For Office Use Only				
Date Received:	Essay Attached:	Application Signed:	Recommendation Forms Received:	
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	Leader	Non-4-H Person
	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
			<input type="checkbox"/> No	<input type="checkbox"/> No

## 4-H Recommendation Form

A Brown County 4-H member, applying for an award of participation in an educational or leadership experience, has asked you to complete a recommendation. Your evaluation is an essential part of this member's application. Please be completely honest in your answers and responses. You may also complete this form online by using this link: <https://forms.gle/ErWfNuXa2iX8XFV89>.

**Directions:**

- Complete the rating chart and provide responses to the questions on this form. This recommendation will not be shared with the 4-H member but will be used by the interview judges in the evaluation and selection process.
- Return the completed form to the 4-H Office at the address provided. DO NOT return the completed form to the 4-H member.

Name of 4-H Member:		Name of First Choice Educational Experience:	
Name of Person Completing the Form:		Phone #:	
How do you know this 4-H Member?			
How long have you known this 4-H member?			

<b>Life Skills Rating Chart</b> Following are the eight Life Skill categories that are targeted in 4-H and the types of skills associated with them. To the best of your ability, please rate the 4-H member named above on each of these categories using the following rating scale: <i>1= poor, 2= fair, 3=neutral or unknown, 4=good, 5=excellent</i>	1	2	3	4	5
<b>Thinking Skills:</b> Decision making, problem solving, critical thinking, service learning skills					
<b>Managing Skills:</b> Goal setting, planning, organizing, record keeping, resiliency skills					
<b>Relating Skills:</b> Communication, cooperation, conflict resolution skills					
<b>Caring Skills:</b> Concern for others, empathy, sharing, nurturing relationship skills					
<b>Giving Skills:</b> Community service and volunteering, leadership, citizenship skills					
<b>Working Skills:</b> Marketable skills, teamwork, self-motivation skills					
<b>Being Skills:</b> Self-esteem, self-responsibility, character, self-discipline skills					
<b>Living Skills:</b> Healthy lifestyles choices, stress management, personal safety skills					

**Questions:**

1. Describe the involvement this 4-H member has had within your organization or in the capacity that you know this youth. Please provide information about attendance, active participation, leadership, etc.
  
2. What do you consider the greatest contribution this 4-H member has made you to your organization or in the capacity that you know this youth?
  
3. Based on your knowledge of this 4-H member, is he or she a good candidate for the award or educational leadership experience that he or she is applying for? Why or why not?
  
4. Is there any other information you wish to provide regarding this 4-H member?

\_\_\_\_\_  
Signature of Person Completing the Form

\_\_\_\_\_  
Date

**Return completed recommendation form by **Tuesday, October 3, 2023** to:**

Brown County 4-H Office  
2019 Technology Way, Room#113  
Green Bay, WI 54311  
email: [4h@browncountywi.gov](mailto:4h@browncountywi.gov)

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4. Is there any other information you wish to provide regarding this 4-H member?

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Signature of Person Completing the Form

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Date

Return completed recommendation form by **Tuesday, October 3, 2023** to:

Brown County 4-H Office  
2019 Technology Way, Room#113  
Green Bay, WI 54311  
email: [4h@browncountywi.gov](mailto:4h@browncountywi.gov)

**Brown County 4-H Educational and Leadership Opportunity Reviewer Scoring Guidelines  
2023-2024**

Name of Applicant: \_\_\_\_\_

**Paper Application Review**

4-H Leadership	
4-H Projects	
4-H Activities	
Community, School, Church Activities	
Member Essay	
Leader Recommendation Form	
Non-Leader Recommendation Form	

**Interview Review**

Appropriate Dress/ Presentation	
Attitude and Expressed Interest	
Knowledge of their Written Application	
Other Leadership/ Experiences	
Preparation for Interview	
Enthusiasm and Willingness to Represent Brown County 4-H	

**Overall comments:**

# Brown County 4-H Educational Experience Participant Requirements

To qualify for the 40% from the Leader's Association Educational Experience participants must:

1. Work the 4-H food stand at the fair during the Educational Experience shift.
2. Send a thank you to the Leader's Association
3. Make a presentation about their educational experience (this may be at their club, school, Leader's Association, etc.)

Fair Food Stand: Date \_\_\_\_\_ Shift \_\_\_\_\_ Who Worked \_\_\_\_\_

Thank You Note Sent: Date \_\_\_\_\_

Presentation: Date \_\_\_\_\_ Where \_\_\_\_\_

To qualify for money from other fundraisers (Game Day Tournament, Fleet Farm, etc.) educational experience participants must participate in fundraiser and complete form below:

Culver's: Date \_\_\_\_\_ Shift \_\_\_\_\_ Who Worked \_\_\_\_\_

Game Day: Date \_\_\_\_\_ Shift \_\_\_\_\_ Who Worked \_\_\_\_\_

Cheese Sale: Date \_\_\_\_\_ Shift \_\_\_\_\_ Who Worked \_\_\_\_\_

1. Donated \_\_\_\_\_
2. Helped by \_\_\_\_\_

Other Fundraising opportunity (designed by the leader's association and delegates):

I have prepared this report myself and it is accurate and correct.

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Return completed form to [redbirds65@sbcglobal.net](mailto:redbirds65@sbcglobal.net) or mail to:  
Brown County 4-H Office  
2019 Technology Way, Room#113  
Green Bay, WI 54311