

TERI LYNN SCHMIDT MEMORIAL SCHOLARSHIP

Date _____

NAME _____ YEARS IN 4-H _____

ADDRESS _____

ACTIVITIES IN 4-H:

INTENDED CAREER:

INTENDED COLLEGE, UNIVERSITY OR SCHOOL:

INTENDED MAJOR IS:

PLEASE ENCLOSE YOUR HIGH SCHOOL TRANSCRIPT:

Make a brief statement as to why you desire financial aid and what you expect to accomplish in your educational endeavor: