

COVER PAGE

Trego County 4-H Development Fund Award Application

Application for youth ages 13 - 19

(Note: Applications do not need to be typed. Handwritten applications are welcome.)
(Applications must be turned in at least 30 days prior to event; please attach copy of event application if applicable.)

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE NUMBER: _____

YEAR IN SCHOOL: _____ **NAME OF SCHOOL ATTENDING:** _____

ACTIVITY APPLYING FOR: _____

COST OF ACTIVITY APPLYING FOR: _____

(Applications must be turned in at least 30 days prior to event; please attach copy of event application if applicable.)

I have personally prepared this application and believe it to be correct.

Signature of Applicant: _____

Date: _____

Send completed application to: Trego County 4-H Development Fund

C/o Renee Neff
Trego Co. Treasurer Office
216 N. Main
P.O. Box 356
WaKeeney, KS 67672

1. Number of years enrolled in a 4-H club: _____

2. Summarize major projects:

3. Summarize major 4-H leadership given to:

a) Club

b) County

c) State

