

Linn County Extension Association

Undergraduate Scholarship Application Packet

Linn County Extension Association offers an Undergraduate Scholarship up to \$500.00 per applicant. This scholarship is based on residency in geographical areas served by Linn County Extension, financial need, GPA, 4-H, other Extension programs, community involvement and/or work experience. This scholarship is paid directly to the college or university in the student's name.

- ❖ Applicant must be a resident of area served by Linn County Extension for a minimum of twelve (12) months prior to application.
- ❖ Applicant must graduate from high school in the current school year or a previous year; possess high school equivalent or G.E.D. certificate, high school completion/examination certificate (home schooled), or diploma. There is no age requirement.
- ❖ Preference given to applicants active, or who have been actively involved, in Extension programs, such as the Linn County 4-H youth program, Master Gardener, or equivalent activity.
- ❖ High school applicant must have minimum GPA of 2.75 to qualify (transcript must be included).
- ❖ Applicant must complete and submit the Linn County Extension Association application packet (form included).
- ❖ Applicant must include cover letter (1 page maximum) outlining/explaining the request for a scholarship.
- ❖ Applicant must include two (2) letters of recommendation (teachers, advisors, 4-H leaders, employer, pastor, etc.)
- ❖ Include letter(s) of acceptance from college(s) or universities. Not needed for re-applicants unless transferring to a different college/university.
- ❖ Applicant must include statement of financial need (form included).
- ❖ Scholarship may be renewable for up to four years. Applicant must reapply each new scholastic year (letters of recommendation are not needed for returning applicants, but transcripts showing academic progress must be included. Scholarships for new applicants will be available in the sum of \$400-\$500 and for previous recipients, \$250-\$400. Preference will be given to applicants who will, or are, attending Oregon colleges.
- ❖ Scholarship Committee may interview qualified first-time applicants.
- ❖ Photocopies of this application are acceptable.
- ❖ **Application deadline is June 15 of current school year.**

Return application to: **LCEA Scholarship Committee**, OSU Extension Service – Linn County, 33630 McFarland Rd, Tangent OR 97389

Linn County Extension Association Undergraduate Scholarship

Instruction Sheet

Cover Letter:

Each applicant must submit a cover letter outlining or explaining his or her request for a Linn County Extension Association Scholarship. Please include the name and location of college/university, major, and the approximate date expected to complete the degree.

A statement indicating the length of time the applicant has been a resident of Linn County should be included.

The cover letter must be signed and dated by the applicant.

GPA:

Each applicant must include a copy (does not need to be an official copy) of his or her school transcripts. If home schooled or tutored, include a copy of applicant's certified periodic achievement test scores.

Application:

Applicant must fill out application completely. If applicant's street and mailing addresses are not the same, make sure to include both.

The application must be signed and dated by the applicant.

Extra-Curricular, Community Involvement and Work Experience:

On a separate sheet of paper, list all extra-curricular activities, community involvement and work experience (include 4-H, other Extension programs, church, school, paid and non-paid work experience, etc.).

Letters of Recommendation:

Applicants must include two (2) letters of recommendation. These letters should come from someone who knows the applicant well and is NOT a member of the applicant's immediate family. Suggested letter writers might include teachers, advisors, 4-H leaders, employers, pastor, etc.

Returning applicants do not need to submit letters of recommendation.

Statement of Financial Need:

Applicant must fill out the financial need form as completely as possible. If any additional explanation is necessary, please include on a separate sheet of paper.

Linn County Extension Association

Undergraduate Scholarship

Application

Name: _____
 Last First Middle

Street Address: _____

City: _____ State: _____ Zip: _____

Phone Number (with area code): _____ Message Phone: _____

E-mail address: _____

Mailing address (if different): _____

Resident of area served by OSU Linn County Extension Service since (month/year): _____

Name of High School: _____
(If home schooled or tutored enter "home" or "tutored")

Address of High School: _____

High School Graduation Date: _____

Applicant's High School GPA: _____ College GPA (if applicable): _____
(Please attach transcripts.) (Include certified periodic achievement test scores if home schooled.)

Name of College Attending: _____ Year in College: _____

College(s) applicant is applying to (indicate if accepted):

1. _____

2. _____

3. _____

Applicants who are awarded a scholarship by the Linn County Extension Association (LCEA) agree to allow the use of their photo to publicize scholarship activities by the LCEA.

Applicant Signature: _____ Date: _____

Linn County Extension Association
Undergraduate Scholarship
Statement of Financial Need

Name of College/University you intend to attend: _____

College/University Address: _____

City: _____ State: _____ Zip: _____

Expense:

Annual cost of:

- | | |
|-----------------------------|----------|
| 1. Tuition | \$ _____ |
| 2. Books | \$ _____ |
| 3. Room and Board | \$ _____ |
| 4. Transportation | \$ _____ |
| 5. Clothing | \$ _____ |
| 6. Health Care | \$ _____ |
| 7. Other | \$ _____ |
| 8. Subtotal (add lines 1-7) | \$ _____ |

Funding:

- | | |
|-------------------------------|----------|
| 9. Loans/Grants | \$ _____ |
| 10. Employment | \$ _____ |
| 11. Savings | \$ _____ |
| 12. Other scholarships | \$ _____ |
| 13. Other available funds | \$ _____ |
| 14. Subtotal (add lines 9-13) | \$ _____ |

Calculation of Financial Need:

Subtotal – Line 8 \$ _____

Subtotal – Line 14 \$ _____

Subtract line 14 from line 8 \$ _____ If line 14 is larger than line 8, enter "0".

Explanation of additional need:

Applicant Signature: _____ Date: _____