

**DUE MARCH 1**

**Howard & Pearl Burgess 4-H Scholarship Application Form**

Name: \_\_\_\_\_  
First Last Middle Initial

Address: \_\_\_\_\_  
Street City/State Zip

Male  Female

Phone: \_\_\_\_\_ County: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Number of Years in 4-H: \_\_\_\_\_

Name of High School: \_\_\_\_\_

City: \_\_\_\_\_ # in Senior Class: \_\_\_\_\_ Rank in Class: \_\_\_\_\_

Place of residence (check one):

- Farm
- Town of less than 2,500
- City of 10,000 - 50,000
- Rural area outside of town
- Town or city of 2,500 - 10,000

Father's Name: \_\_\_\_\_  
First Last Middle Initial

Address: \_\_\_\_\_  
Street City/State Zip

Father's occupation and approximate annual income: \_\_\_\_\_

Mother's Name: \_\_\_\_\_  
First Last Middle Initial

Address: \_\_\_\_\_  
Street City/State Zip

Mother's occupation and approximate annual income: \_\_\_\_\_

Number of children in the family: \_\_\_\_\_ Ages: \_\_\_\_\_

Will you have brothers or sisters attending college at the same time as you? \_\_\_\_\_

If so, how many? \_\_\_\_\_

Where do you plan to continue your education? \_\_\_\_\_





**In the space provided, highlight your 4-H participation**

Number of years in 4-H: \_\_\_\_\_ In this county: \_\_\_\_\_ In other county: \_\_\_\_\_

Major projects: \_\_\_\_\_

Major 4-H honors received: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Offices held: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Special activities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List your other interests and activities. Limit response to space provided.

School: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Community: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Church:

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Other:

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## **Applicant Agreement**

Should I be a recipient of the Howard and Pearl Burgess 4-H Scholarship I agree to:

- ♦ Remain a full-time student during the scholarship period.
- ♦ Notify the Walla Walla County Extension Director in event that I cease to be a full-time student.
- ♦ Provide the Walla Walla County Extension Director a transcript of my grades during this scholarship period.
- ♦ Maintain a minimum 2 point (C) average during this scholarship period.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Included:

Most Current Permanent 4-H Record (C0935)

Transcript of current grades and standing

Copy of most current IRS 1040

See Howard & Pearl Burgess 4-H Scholarship Fund Application Requirements for complete rules.



**DUE MARCH 1**

# Howard and Pearl Burgess 4-H Scholarship Recommendation Form

Applicant's Name:

First

Last

Middle Initial

Address:

Street

City, State, Zip

County

Please rate the applicant only on the items you are familiar with.

	<b>Outstanding</b>	<b>Average</b>	<b>Below Average</b>
<b>Scholarship</b>			
intelligence			
performance, past and present			
future promise (academic success)			
interest in study			
independence of thought			
<b>Active participation in</b>			
school			
church			
4-H club			
community			
<b>Gets along with people</b>			
acceptance by own age group			
friendly and cooperative			
<b>Traits</b>			
sincere			
honest			
accepts responsibility			
<b>Maturity</b>			
gets along in new situations			
can represent his or her group well			
can share with others what he or she			

(continued on next page)

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will applicant benefit by continuing his or her education? Why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Need for scholarship? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendation completed by: \_\_\_\_\_  
First Last MI

Address: \_\_\_\_\_  
Street City, State Zip Code

Relationship to applicant:

4-H Leader

Teacher/Instructor

Other \_\_\_\_\_

Number of years you have known applicant: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Extension programs and policies are consistent with federal and state laws and regulations on nondiscrimination regarding race, sex, religion, age, color, creed, national or ethnic origin; physical, mental or sensory disability; marital status, sexual orientation, or status as a Vietnam-era or disabled veteran. Evidence of noncompliance may be reported through your local Extension office.*

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(continued on next page)

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Relationship to applicant:  
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 Teacher/Instructor  
 Other \_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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(continued on next page)

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
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First Last MI

Address: \_\_\_\_\_  
Street City, State Zip Code

Relationship to applicant:  
 4-H Leader  
 Teacher/Instructor  
 Other \_\_\_\_\_

Number of years you have known applicant: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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# Howard and Pearl Burgess 4-H Scholarship Fund

Howard and Pearl Burgess were active community members from the time they moved here in 1930 when he joined the Extension Service of Washington State University until his death in 1984. Howard loved and lived for agriculture and its benefit to the area. He also helped build Borleske Stadium, was among the first to propose the Fort Walla Walla Museum, and worked on the Southeastern Washington Fair for 34 years.

Howard and Pearl had no children of their own, but they had a deep and abiding interest in all of the 4-H members and projects of the area. Because of this interest, they established a trust, which is administered by the Blue Mountain Area Foundation and will provide continuing support for Walla Walla County 4-H scholarships.

**The trust specified that the recipient shall be thrifty, ambitious, and needy. These shall each be given equal weight in consideration of applications.**

In order to determine the thrift and ambition of the applicant, the agent and committee will pay special attention to page three of the application form and the work and savings statement on page two. The applicant may include any other related financial information that would aid the selector(s).

## **APPLICATION REQUIREMENTS**

To apply for this scholarship, an applicant must turn in the following completed forms to the Washington State University Cooperative Extension office in Walla Walla County. Forms are available from the Extension office.

- Howard and Pearl Burgess Scholarship Fund* **Application Form**
- Applicant's most current **Permanent 4-H Record** (C0935)
- Transcript** of applicant's current grades and standing from their high school or institution of higher learning
- Howard and Pearl Burgess 4-H Scholarship* **Recommendation Form** from **4-H leader**
- Howard and Pearl Burgess 4-H Scholarship* **Recommendation Form** from a **teacher/instructor**
- Howard and Pearl Burgess 4-H Scholarship* **Recommendation Form** from **another adult**
- Most current **IRS 1040** available from parent(s) (if you are a dependent) or self (if you are independent), Social Security numbers may be marked out.

It is the sole responsibility of the applicant to be sure that all forms including transcripts and their recommendations reach the Extension office prior to the deadline. Sometime well prior to the deadline, each applicant should check with the Extension office to be certain that all three recommendation letters have been received.

Each year there will be available from the Howard and Pearl Burgess Scholarship Fund two scholarships, one each for a boy and a girl from Walla Walla County. **The recipients shall be residents of Walla Walla County and have been active 4-H members for at least three years.**

High school seniors may apply for their freshman year and college freshman may apply for their sophomore year. 4-H alumnae who have been out of high school no more than two years and have not attended college may apply for their freshman year.

The scholarship may be used at any accredited school of higher education including a college, university, technical or trade school, not limited to the state of Washington. It shall be for expenses of the freshman or sophomore year.

A recipient could receive the scholarship a second year, but must reapply and be selected from a field of entrants. No applicant may receive the scholarship more than twice.

The trust specifies that the final choice of the winners is the responsibility of the Extension agent (director). That agent may or may not appoint an advisory committee to aid in the selection of the scholarship recipients.

No son, daughter, stepson, or stepdaughter of the Walla Walla County Extension agent shall be eligible to apply for this award.

The award will be paid directly to the school when the student brings to the Extension office the written notice of acceptance by the school the student will attend.

In the event that the recipient ceases to be a full-time student, the extension agent (chair) will be notified immediately by the scholarship recipient.

WSU Extension programs and policies are consistent with federal and state laws and regulations on nondiscrimination regarding race, color, gender, national origin, religion, age, disability, and sexual orientation. Evidence of noncompliance may be reported through your local WSU Extension office.