

# **Carter County Extension Homemakers Association, Inc.**

## **Scholarship Application Packet**

The Carter County Extension Homemakers Association, Inc. is sponsoring a scholarship of **\$250.00**.

**Purpose:** The purpose of the Scholarship fund, sponsored by the Carter County Extension Homemakers Association, Inc., is to provide financial assistance for one year to a student who desires to further his/her education.

**Eligibility Requirements:** The individual must be a resident of Carter County who is entering or returning to school and must be a member of CCEHA, Inc., for at least one full year. An applicant is not eligible to receive this scholarship in two consecutive years.

**Amount:** The number of scholarships and their amounts will be determined by the CCEHA, Inc., Council and the County Family & Consumer Sciences Agent, as advisor, each year for the following fall.

**Criteria:** The scholarship(s) will be granted based on need, scholastic ability, and recommendation. All applicants must complete in full each portion of the form as it applies.

**Deadline:** **Applications must be received by April 23, 2021**  
There will be automatic disqualification if the deadline is not met by the applicant.

**CARTER COUNTY  
EXTENSION HOMEMAKERS ASSOCIATION, INC.**

**Section I: Family and School**

1. Name of Applicant: \_\_\_\_\_  
  Last                                  First                                  Middle
  
2. Home Address: \_\_\_\_\_  
  Street                                  City                                  Zip
  
3. Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_
  
4. Father or spouse (name in full) \_\_\_\_\_
  
5. Mother (name in full) \_\_\_\_\_  
Homemaker Club Member of: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Living (  ) Deceased (  )
  
6. Guardian's name if not living with parents: \_\_\_\_\_
  
7. Are you a resident of Carter County: Yes (  ) No (  )
  
8. Number of children in family and their ages: \_\_\_\_\_  
\_\_\_\_\_
  
9. What school are you attending: \_\_\_\_\_  
Location: \_\_\_\_\_
  
10. Specific field of education you are entering: \_\_\_\_\_  
Home Economics (Specific area): \_\_\_\_\_  
Agriculture (Specific area): \_\_\_\_\_

**Section II: Finances**

1. What is the approximate gross annual income of your family: \_\_\_\_\_
  
2. Have you applied for or received other scholarships, grants or financial aid for the upcoming school term? Yes (  ) No (  )

**Section III: School and Community**

1. List:

School Activities: FHA Member \_\_\_\_\_ FFA \_\_\_\_\_

Other \_\_\_\_\_

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

\_\_\_\_\_

Special Activities: \_\_\_\_\_

\_\_\_\_\_

Special Honors: \_\_\_\_\_

\_\_\_\_\_

2. State in 100 words or less why you are applying for a scholarship (may be on an attached sheet).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Ask three individuals to complete a recommendation form on your behalf. (Please do not use family members). The completed recommendation forms must accompany your application.

All information will remain confidential.

Your application and reference must be in the Carter County Extension Office by April 23, 2021  
You may bring them to the office or mail them to:

Carter County Homemakers Assoc., Inc.  
Carter County Extension Office  
94 Fairground Dr  
Grayson, KY 41143

*(If student withdraws from school during the first six weeks of school, the scholarship must be repaid in full.)*

# LETTER OF REFERENCE

Reference for: \_\_\_\_\_ Written by: \_\_\_\_\_

Evaluate the candidate by completing the character rating and making additional comments. If you are not familiar enough with the candidate, please indicate that you are unable to complete the recommendation form.

(Please check)	Out-standing	Above Average	Average	Below Average	Very Poor	Unknown
Scholarship-Mastery of essentials in academic & extracurricular subjects						
Personal Appearance-Dress; cleanliness; bearing						
Reliability-Faithfulness in duties; personal integrity; sense of responsibility						
Cooperativeness-Willingness to work with others						
Personality-Ability to express thoughts; effectiveness & fluency in speaking and writing						
Leadership-Ability to lead others						
Industry-Willing to put out effort needed for college work						
Intelligence-Judgment: originality; ability to think logically						
Personal Interest						

Signed \_\_\_\_\_ Date \_\_\_\_\_

Position & Organization \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Candidate: Instructor \_\_\_\_\_ Advisor \_\_\_\_\_ Other \_\_\_\_\_  
(Specify)

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Signed \_\_\_\_\_ Date \_\_\_\_\_

Position & Organization \_\_\_\_\_

Address \_\_\_\_\_

Relationship to Candidate: Instructor \_\_\_\_\_ Advisor \_\_\_\_\_ Other \_\_\_\_\_  
(Specify)

## **TO THE PERSON WRITING THE RECOMMENDATION:**

Evaluate the candidate by completing the character rating and making additional comments. If you are not familiar enough with the candidate, please indicate that you are unable to complete the recommendation form.

The following are suggested guidelines for writing a recommendation.

- Learn about the candidate's goals before you write.
- Consider what stands out about the candidate.
- Explain your relationship to the candidate.
- Compare the candidate to others.
- Address qualifications that are related.
- Comment on strengths and weaknesses.
- Be as specific as possible.
- Use details to support your remarks—give concrete examples.
- Volunteer to provide further information on the phone.
- End on a positive note.

Please sign, date, and return this recommendation form directly to the candidate to return with his/her application.

## **TO THE CANDIDATE:**

Recommendation forms should be given to the individuals most qualified to make meaningful, supportive statements about your academic performance. Professors, academic advisors, organization advisors, counselors, and past or current supervisors or employers are excellent sources.

**Contact in person the individuals you have selected to write in your behalf.** Discuss your educational plans with the writer to aid him/her in completing your recommendation.