



Audrain County 4-H Foundation



Pat Kotsenburg Memorial Scholarship

Name of person for which assistance is requested: _____

Event or item for which assistance is requested: _____

Total Cost _____ Amount of assistance requested. _____

Is this individual eligible for any other funds to assist with these fees? _____

If yes, how much? _____ (This would include County 4-H Council scholarships or state scholarships for State Congress or Leaders Forum or club funds)

Circumstances which would make it difficult for this person to participate in 4-H or this 4-H activity without financial assistance.

How will this event or activity enhance the recipient's 4-H experience.

Person submitting assistance request: _____

Funds may be requested for 4-H membership fee, literature, trip or event fees, 4-H Camp fees, contest fees or fees for leaders to attend State Leader Forum or other leader training. Club Leader, Project Leader, parent or individual may submit requests.

Date Received _____	Amount Approved _____	Reply Sent _____
---------------------	-----------------------	------------------