

SANTA CRUZ COUNTY INFORMATION AND FORMS

**SANTA CRUZ COUNTY 4-H COUNCIL CAREER DEVELOPMENT
SCHOLARSHIP APPLICATION**

NAME: _____

ADDRESS: _____
(Street) (Town and Zip Code)

PHONE NUMBER: _____ EMAIL: _____

CLUB: _____ DATE OF BIRTH: _____

HIGH SCHOOL: _____

WHEN WILL YOU GRADUATE FROM HIGH SCHOOL? (Month and Year) _____

ALREADY GRADUATED? Yes _____ WHEN _____

WHAT IS YOUR CAREER INTEREST AT THIS TIME? _____

WHAT JOBS HAVE YOU HELD OR WORK HAVE YOU DONE? _____

THINGS WE MIGHT LIKE TO KNOW ABOUT YOU (such as 4-H activities, school, church, community, hobbies, etc.) (Attach separate sheet, if necessary.)

NAMES OF ONE OR TWO PEOPLE WHOM THE INTERVIEWERS MAY CONTACT FOR FURTHER INFORMATION ABOUT YOU (other than relatives).

(Name) (Address) (Phone)

(Name) (Address) (Phone)