

2025 DEKALB COUNTY EXTENSION HOMEMAKERS SCHOLARSHIP GUIDELINES

This scholarship is sponsored by the DeKalb County Extension Homemakers Organization. Up to three scholarships will be awarded at a minimum of \$500 each (for tuition only).

1. The Applicant must be a resident of DeKalb County or a member of DeKalb County 4-H
2. The Applicant must be:
 - a. a current member for 2 or more years in the DeKalb County Extension Homemakers, **AND/OR**
 - b. a child or grandchild (stepchild or step-grandchild) of a current member for 2 or more years in DeKalb County Extension Homemaker, **AND/OR**
 - c. a member of the DeKalb County 4-H, minimum of 5 yrs. membership, **AND/OR**
 - d. a current 4-H leader with 2 or more years of service.
3. The Applicant must have been accepted to attend an accredited college, university or vocational school.
4. The Applicant must have a high school diploma or G.E.D. and have maintained a "C" average. High school applicants must include a copy of your high school grade transcript with application. Adult applicants must include a copy of your most recent transcript – high school, vocational school or college transcript with application.
5. If the Applicant is a member of 4-H, you must provide a copy of your official 4-H record (from the Extension Office) with the application.
6. The Applicant must have two (2) Reference Sheets filled out by non-relatives, and included with the application.
7. The Applicant must submit a one-page typed (200 word minimum) essay answering this question: *"Why did you choose your course of study and what are your future plans?"*
8. If chosen, the Applicant must furnish date needed, address of Scholarship Office of college or school, and your student ID. Scholarship will be mailed directly to the school.
9. Application with Signatures, Transcript, one page about career choice and future plans, and References must be received in the DeKalb Co. Extension Office (or postmarked) by **MARCH 3:**

DeKalb County Extension Office
Attn: Ext Hmkrs Scholarship Committee
215 E 9th Street, Suite 300
Auburn IN 46706

2024 DEKALB COUNTY EXTENSION HOMEMAKERS SCHOLARSHIP APPLICATION

Date_____

Name_____ Telephone_____

Address_____

City_____ State_____ Zip Code_____

Email Address_____

Your place of employment (if any) _____ How long? _____

Do you have a parent/grandparent currently a member of DeKalb County Extension

Homemakers? Name of Homemaker_____

Name of 4-H Club or Extension Homemaker Club that you are a member of:

Club_____

1. Course of Study_____

2. Career Choice_____

3. Choice of College or Vocational School_____

4. Have you been accepted for admittance to this school? YES NO

5. List your involvement in school, church, community, organizations, etc.

Applicant Signature

4-H Leader or President of Extension Homemaker Club

REFERENCE SHEET

(All References Will Be Held Confidential)

Reference for: _____

NAME _____

ADDRESS _____

1. In what capacity have you known the Applicant?

_____ Applicant's Teacher

_____ 4-H Leader

_____ Family Friend

_____ Employer

_____ Counselor

_____ Other

_____ Advisor / Coach

2. Please explain why you think this Applicant should be selected to receive the DeKalb Co. Extension Homemakers Scholarship. You can use a separate piece of paper, if needed.

(Please place in sealed envelope and return to Applicant to be attached to their application)

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(All References Will Be Held Confidential)

Reference for: _____

NAME _____

ADDRESS _____

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ESSAY: (Minimum of 200 words)

Why did you choose your course of study and what are your future plans?