GRAND TRAVERSE COUNTY 4-H YOUTH LEADERS ASSOCIATION
ADVISORY BOARD SCHOLARSHIP APPLICATION
REIMBURSEMENT PROGRAM

ELIGIBILITY:

To be eligible for this scholarship, applicants must:

1. Be an active 4-H youth member or volunteer in Grand Traverse County.
2. Have a financial need that limits the ability to participation without assistance.
3. Only receive a maximum of 4 scholarships per year, scholarships may be limited based upon available funds.
4. Before the Event: Return completed application to:

   MSU Extension 4-H
   520 W. Front St., Suite A
   Traverse City, MI 49684

   Phone: 231-922-4825
   Email: kotzemil@msu.edu
5. Within two weeks of the event: submit supporting documents (hotel receipt, agendas, etc.) for reimbursement
6. Share their experience with others. Check all that apply:

   ___ Present to applicant's 4-H Club ___ Classroom presentation

   ___ Enter an exhibit at the fair ___ Other (specify) _____

PARTICIPANT:

Name _____ Years in 4-H _____

Phone _____ 4-H Club(s) _____

Activity Attending _____ Date & Location: _____

Is the participant a member of the Northwest Michigan 4-H Livestock Council? _____ No _____Yes

Has the participant applied for any other scholarships for this event? _____ No _____Yes

If yes, list scholarships:_____

YOUTH PARTICIPANTS ONLY:

Please type your answers to the following questions; attach extra pages if necessary.

1. What projects/activities have you participated in while involved with 4-H? Include number of years for each.

2. What new skills have you learned in 4-H?

3. Why do you want to participate in this activity?

4. What do you think you will learn? How will you use that knowledge when you get back?

5. How will you help finance your portion of this opportunity? (examples: child care, lawn mowing, pop cans, etc)

REIMBURSEMENT GUIDELINES:

Registration Fee (eligible for direct activity payment):

- MSU Exploration Days, MSU events & 4-H sponsored events reimbursed up to 50% of the registration fee.
- Additional registration add on items or incentives are not included.

Lodging (reimbursement only):

- Hotel stipend is $50 per room. An itemized receipt must be provided.
- Activity must be 100 or more miles away (one way) and start before 10:00 a.m. the next morning.
- Activities that include lodging in the price are excluded from additional reimbursement.

Transportation (reimbursement only; for 4-H sponsored activities, workshops and events):

- Mileage is calculated at $0.14 per mile, per car (IRS allowance for volunteers)
- If a bussing option is offered (example: MSU Exploration Days), personal vehicle mileage is not available.

PARTICIPANT:

	Estimated Total Cost	**Scholarship Amount**	
Registration Fee	$_____	$_____	____ Request direct activity payment
Lodging	$_____	$_____	
Transportation *(Electronic map miles to event x .14 per mile per car)*	$_____	$_____	
TOTAL COST	**$_____**	**$_____**	**FINAL APPROVED AMOUNT**

REIMBURSEMENT: Please provide a payee name and address below. A check will be sent after the event.

Name_____ Phone _____
Print Name

Address_____ City_____ Zip_____

_____ _____ _____
Signature (person submitting request) **Date** **Email**

4-H STAFF USE ONLY

Approved By & Date:	Check Sent Date:
Supporting Documents – Received Date & Type:	Shared Experience - Type With Date Completed:

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