## NATIONAL 4-H CONFERENCE SCHOLARSHIP FORM

To be considered for the National 4-H Conference Scholarship Program, please follow the steps listed below.

**STEP 1**: Applicants must complete **Part A** (saved as LastName-FirstName\_ScholarshipForm\_Natl4-HConf) with resume (saved as LastName-FirstName\_Resume\_Natl4-HConf).

**STEP 2**: Email the completed form with resume to your Land-grant University or State 4-H Office using subject line "National 4-H Conference Scholarship Program".

STEP 3: The Land-grant University or State 4-H Office must email completed forms and resumes to National4-HConference@usda.gov, using subject line "National 4-H Conference Scholarship Program" by scholarship deadline.

**STEP 4:** If selected as a scholarship recipient, complete **Part B** and email the completed form to your Land-grant University or State 4-H Office using subject line "National 4-H Conference Scholarship Program Recipient".

## PART A - SCHOLARSHIP INFORMATION APPLICANT INFORMATION (Required) List the following information found on your photo identification. FULL NAME (First, Last) DATE OF BIRTH (Month Day Year) MAILING ADDRESS Apt, Unit, etc. 4. CITY ZIP CODE STATE EMAIL ADDRESS CELL PHONE NUMBER 10. REGISTRATION TYPE (Select one) ☐ Adult Chaperone ☐ Youth Participant (Delegate) **DEMOGRAPHIC INFORMATION** (Optional) This information will inform our understanding of demographics among the National 4-H Conference scholarship recipients. 11. AGE (on 1<sup>st</sup> day of National 4-H Conference) 12. GRADE LEVEL Youth delegates must be 15 to 19 years-old. 13. What is your race and/or ethnicity? Select all that apply and enter additional details in the spaces below. ☐ American Indian or Alaska Native – Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc. $\square$ Asian - Provide details below. ☐ Chinese ☐ Asian Indian ☐ Filipino ☐ Vietnamese ☐ Korean □ Japanese Enter, for example, Pakistani, Hmong, Afghan, etc. ☐ Black or African American - Provide details below.



	Expiration Date 01/31/2027
☐ African American ☐ Jamaican ☐ Haitian ☐ Nigerian ☐ Ethiopian ☐ Somali Enter, for example, Trinidadian and Tobagonian, Ghanaian,	Congolese, etc.
☐ Hispanic or Latino - Provide details below. ☐ Mexican ☐ Puerto Rican ☐ Salvadoran ☐ Cuban ☐ Dominican ☐ Guatemala Enter, for example, Colombian, Honduran, Spaniard, etc.	
☐ Middle Eastern or North African - Provide details below. ☐ Lebanese ☐ Iranian ☐ Egyptian ☐ Syrian ☐ Iraqi ☐ Israeli Enter, for example, Moroccan, Yemeni, Kurdish, etc.	
☐ Native Hawaiian or Pacific Islander - Provide details below. ☐ Native Hawaiian ☐ Samoan ☐ Chamorro ☐ Tongan ☐ Fijian ☐ Marshalles Enter, for example, Chuukese, Palauan, Tahitian, etc.	
☐ White - Provide details below. ☐ English ☐ German ☐ Irish ☐ Italian ☐ Polish ☐ Scottish Enter, for example, French, Swedish, Norwegian, etc.	
14. SEX	
☐ Female	
☐ Male	
4-H PROGRAM INFORMATION	
15. How many years have you participated in 4-H?	
☐ Less than 1 year	
□ 2 to 5 years	
□ 5 to 10 years	
☐ More than 10 years	
16. Which Land-grant University is your 4-H program associated with?	
17. Have you previously attended National 4-H Conference? ☐ Yes ☐ N If yes, what year?	No
REFERENCES	
Please enter the name, phone, and email address for two references, who  18. REFERENCE FULL NAME (First, Last)	are not related to you.  19. RELATIONSHIP
20. TELEPHONE NUMBER	21. EMAIL ADDRESS



		<u> </u>			
22.	REFERENCE FULL NAME (First, Last)	23. RELATIONSHIP			
24.	TELEPHONE NUMBER	25. EMAIL ADDRESS			
Plea	QUESTIONNAIRE (Youth Participant Only)  Please write a clear and complete response to each question. These questions are an opportunity to introduce yourself and explain why you would like to attend National 4-H Conference.				
	26. Why are you interested in attending National 4-H Conference? (100 words)				
27	What do you hope to gain from this experience? (100 words)				
27.	what do you hope to gain from any experience. (100 words)				
28.	At the National 4-H Conference, federal agencies will ask for youth voi agencies. What unique perspective would you bring to the conference?				
29.	How have you demonstrated civic engagement (volunteering to help oth				
	service projects, civic engagement programs or activities you have parti	icipated in. (100 words)			
30.	Please send a PDF of your current resume outlining your education and engagement. Name the file as LastName-FirstName_Resume_Natl4-HC				



PARTICIPANT AFFIRMATION	ON				
☐ By checking the box to the left, I affirm that all the information included in this application about my personal information, background, experiences and skills is accurate. I am either 18 years of age or older, or I have discussed this with my parents/legal guardian, who by their signature below agree with my decision to attend National 4-H Conference.					
☐ By checking the box to the left, I consent to receive email, mail, texts or phone call communications relating to announcements, assignments, logistics, mentoring or similar matters regarding the National 4-H Conference.					
31. PARTICIPANT NAME (First, Last)	32. PARTICI	IPANT SIGNATURE	33. DATE		
PARENT/GUARDIAN CONSE	ENT				
☐ By checking the box to the left, I affirm that I am the parent/guardian of the abovenamed participant and consent to their participation in the National 4-H Conference scholarship opportunity. I understand that providing consent is voluntary and not required. I understand that not providing consent may limit this young person's ability to receive a National 4-H Conference scholarship.					
34. PARENT/GUARDIAN NAME	35. PARENT SIGNAT		36. DATE		
37. EMAIL			38. TELEPHONE NUMBE	R	
PART B – REGISTRATION INFORMATION  Complete Part B only if selected as a scholarship recipient. Part B includes the additional information collected on the National 4-H Conference online registration system.  PARTICIPANT INFORMATION					
39. T-SHIRT SIZE					
□ Small □ Med	lium 🗆 I	Large $\square$ XL	□ 2XL	□ 3XL	
LODGING INFORMATION (I		_			
This information must be assigned by 40. CHECK-IN DATE	Land-grant Col	lege or University or M	filitary Service Branch.  41. CHECK-OUT DATE		
40. CHECK-IN DATE			41. CHECK-OUT DATE		
42. NAME OF ROOMMATE					
REASONABLE ACCOMMOD	ATIONS				
43. ACCOMMODATION REQUESTED (be as specific as possible, if accommodation is time sensitive, please explain)					
44. REASON FOR REQUEST					
DIETARY INFORMATION					
45. DIETARY RESTRICTIONS (c)	heck all boxes th	at apply)			
☐ None ☐ Dair	y Free	□ Vegan	☐ Nut Free		
☐ Gluten Free ☐ Veg	etarian	☐ Other			



NAME BADGE INFORMATION				
46. List your first name as you woul	d like it to appear on your name badge.			
47. List the Land-grant Institution or	Military Service Branch you are repres	senting.		
	diana; Virginia State University, Virgi	nia; Hill Air Force Base, Utah; USAG Brussels		
Army Base, Belgium				
□ACTIVITY PREFERENCES				
		stion topics can be found in the Delegate		
Handbook. (For Youth Delegate	s Only)			
1st choice	2nd choice	3rd choice		
49. List your delegates top three cho Handbook. (For Chaperones Onl		y Service choices can be found in the Delegate		
Tidilabook. (1 of Gliaperolies Oli	3)			
1st choice	2nd choice ones and youth delegates) are in your de	3rd choice		
50. How many people (addit chapero	ones and youth delegates) are in your de	negation: (For Chaperones Only)		
	CRETARY OF AGRICULTURE			
51. If you had the chance to ask the	U.S. Secretary of Agriculture a question	a, what would it be?		
PARTICIPANT AFFIRMATIO	)N			
		e National 4-H Conference community and that I		
		n Development Program. Therefore, I have read,		
understand, and will abide by the Nat	ional 4-H Conference Handbook and Co	ode of Conduct.		
$\square$ By checking the box to the left, I c	onsent to the reproduction, and use, roy	alty-free, of motion picture films, videotapes,		
		National Institute of Food and Agriculture, United		
		o, education, training, trade, display, editorial, United States, its officers, employees, nominees,		
		ight I may have in connection with such		
reproduction, and use.	y y y y y y y y			
Dry checking the hear to the left. I w	ndowstand that all publications films al	ides videos estictic os cimiles endesvess		
		ides, videos, artistic or similar endeavors, erty of the United States, and as such, will be in		
resulting from my National 4-H Conference experience will become the property of the United States, and as such, will be in the public domain and not subject to copyright laws.				
		.h		
$\square$ By checking the box to the left, I consent to receive email, mail, texts, or phone call communications relating to announcements, assignments, logistics, mentoring, or similar matters regarding the National 4-H Conference.				
☐ By checking the box to the left, I consent to participate in National 4-H Conference evaluation by a third-party evaluator.				
Evaluation may include participating in observations, evaluations, and feedback relating to a participation in National 4-H Conference activities (such as survey assessments or formal observations). I consent to share my demographic information				
(such as age, ethnicity, race, sex, Land-grant University, etc.) with the third party National 4-H Conference evaluator.				
$\Box$ By checking the box to the left, I consent to be transported while participating in and traveling to and from this event by				
☐ By checking the box to the left, I c hired drivers authorized by the organi		ting in and traveling to and from this event by		
52. PARTICIPANT NAME (First,	53. PARTICIPANT SIGNATURE	54. DATE		
Last)				



## PARENT/GUARDIAN CONSENT

☐ By checking the box to the left, I affirm that I am the parent/guardian of the above-named participant and consent to their participation in National 4-H Conference. I have read, understand, and agree to follow the National 4-H Conference Handbook and provide consent for the participant affirmation(s) checked above. I understand that providing consent is voluntary and not required. I understand that not providing consent may limit this young person's ability to participate in National 4-H Conference.

55.	PARENT/GUARDIAN NAME		
55.	THEN TO GET THE THE THE THE THE THE THE THE THE T		
56	EMAIL	57	TELEPHONE NUMBER
50.	LWAIL	٥/٠	TELETHONE NOWIDER
F0	DADENIT/CHADDIANI CICNIATUDE		DATE
58.	PARENT/GUARDIAN SIGNATURE	59.	DATE

## NON-DISCRIMINATION STATEMENT

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To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at How to File a Program Discrimination Complaint and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

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