

North Carolina Extension & Community Association, Inc. Scholarship Application

Application must be completed and returned by February 15, 2024

Chec	ck one:				
	_ Youth Application				
	(An individual currently in senior ye	ear of high school education)		break in her/his formal	
	_ Adult Application	,	,		
	(An individual who has completed high s further her/his education.)	school and has had	d a break in her/his ed	lucation and wishes to	
			WING FALL TER		
	Previous applicants and/or recip	ients may reapp	ply each year that t	hey remain in school	
of st	purpose of the scholarship is to assist study, with priority given to Family and Cors per semester and full-time students must	onsumer Science	es. (Part-time stude	nts must carry no less than s	
1.	Full Name				
	Full NameFirst	Middle		Last	
2.	Home Address				
۷.	Home AddressStreet or Route		County	_	
			·		
	C'	Te	elephone_()_		
3.	City State Date of Birth	Zip Fr	nail		
٥.	Date of Birtin		<u> </u>		
4.	Intended Major				
5.	Intended College				
٥.	Have you been accepted () yes	() no			
6.	Career Objectives				
7.	Marital Statussingle	married	divorced	widowed	
8.	Parents' Names and Occupation				
0					
9.	Ages of dependent children (if applica	ible)			
	Ages of dependent siblings (if applica	ble)			

	nection and Involvement with Cooperative Extension Service (NCCES) Extension & Community Association {NCECA} member or relative, 4-H, programs presented for	(25%) r NCCES, etc.)		
 Fina	ncial Need	(25%)		
a.	Approximate family income per year (check one): () below \$10,000 () \$10,000 to \$20,000			
	() \$20,000 to \$30,000 () \$30,000 to \$40,000			
1_	() \$40,000 to \$50,000 () above \$50,000			
b.	Approximate tuition and fees per year for school/university			
c	Employment			
d.	How do you plan to finance your education			
Scho	Scholarship Potential			
a.	Attach high school or college transcripts.	(25%)		
b.	List scholarships applied for or received			
Ехре	ected date of college/university graduation			
Atta	ch a paragraph briefly explaining the value or impact the NCECA, Inc. and/or the life.			
Dafa	rences - Attach three (3) letters of reference			
Kere	II NODGA I G . G . ID . I			
	ewed by NCECA, Inc. County Council President			
	ewed by NCECA, Inc. County Council President Date			