

## Dr. Lynn Russell Memorial AEHC Scholarship Application

The criteria for the Dr. Lynn Russell Memorial AEHC Scholarship for **\$750** is as follows:

1. This scholarship is awarded to a junior in college (with a minimum of **59 credit hours** completed) **majoring in Family and Consumer Sciences/Human Environmental Sciences.**
2. The student must be enrolled in an Arkansas college or university.
3. The student must have an accumulative grade point of **2.5 or higher.**
4. **Preference will be given to an Arkansas high school graduate or native of Arkansas.**
5. **The final decision** will be made by the three Arkansas Extension Homemakers Council **District Directors** from the nominees submitted.
6. **Incomplete applications** will not be considered.
7. The Scholarship is written to the school attending.

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## Scholarship Questionnaire

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Name

Date

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Address

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City/State/Zip Code

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County/Telephone Number, include Area Code E-Mail Address

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Major

GPA

Junior or Senior

Credit Hours Completed

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Name of College or University you are currently attending

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Address of College or University you are currently attending

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City/State/Zip Code of College or University you are currently attending

(continued)

1. Name of high school from which you graduated, what county, what state:  
\_\_\_\_\_  
\_\_\_\_\_
2. List activities in which you participated where leadership skills are involved:  
\_\_\_\_\_  
\_\_\_\_\_
3. List your work experience:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. List extracurricular activities, honors, and awards you received while you were in high school:  
\_\_\_\_\_  
\_\_\_\_\_
5. List extracurricular activities, honors, and awards you received while you were in college:  
\_\_\_\_\_  
\_\_\_\_\_
6. Have you applied for financial aid or other scholarship? If so, list where and when these applications were made:  
\_\_\_\_\_  
\_\_\_\_\_
7. How do you plan to finance the remainder of your college work?  
Parents \_\_\_\_\_ Grants \_\_\_\_\_ Work \_\_\_\_\_ Scholarships \_\_\_\_\_
8. Please describe in your own words and handwriting, in 500 words or less, why you want to be a recipient of this scholarship offered by the Arkansas Extension Homemakers Council, Inc.
9. Send your essay along with a copy of your transcript and this completed form to:

**Betty F. Oliver**  
**2301 South University Avenue**  
**P. O. Box 391**  
**Little Rock, AR 72203**

**ALL MATERIALS MUST BE POSTMARKED BY MARCH 3**