

**Pauline Bartholomew
Young Extension Homemakers Scholarship Form**

County _____ District _____

Name _____

Address _____

City/State/Zip Code _____

Telephone Number including Area Code _____

E-Mail Address _____

Years in EHC _____ Current Club Name _____

Are you a current EHC member? _____ (Yes or No) Age _____ (Must be 40 or under)

List club activities in which you have participated:

Why are you interested in receiving this scholarship?

Give a brief sketch of your family and activities in regard to children, work and community:

Applicant's Signature

County Extension Agent - Family and
Consumer Sciences – Signature

Deadline: May 15