



PAUL & JILL HALL EXPAND YOUR HORIZONS PROGRAM

Two \$1,000 scholarships awarded for 2025.

The following requirements will apply to all scholarships:

1. Applicant must have completed one year of **college or technical school** with at least a “C” average.
2. Applicant must be a full-time Kentucky resident.
3. Applicant must have been an active Kentucky 4-H member.
4. Applicant must have college or technical school involvement outside of studies.

Application Process:

1. Applications available at the Kentucky 4-H Foundation’s website at www.kentucky4hfoundation.org
2. In order to be considered, all applications must be submitted electronically to melissag.miller@uky.edu by Friday, May 16, 2025. Applications received via the mail will not be considered. Scholarship winners will be announced and recognized during the Kentucky 4-H Teen Conference held on the University of Kentucky campus June 10-13, 2025; attendance is required.
3. Each application shall be accompanied with the following information:
 - a. Completed Application with signature of applicant.
 - b. Two letters of recommendation, one from each of the following people:
 - i. Mentor (ie. Professor, Local Business Owner)
 - ii. Non-family member
 - c. Resume
 - d. Current college or technical school transcript or equivalent.
 - e. Recent color photograph of applicant (preferably head-and-shoulders portrait).
4. Selection process will be based on the following priorities:
 - a. Involvement in 4-H and involvement in extracurricular activities outside of academics.
 - b. Academic achievement.
 - c. Leadership Involvement.
5. All applications will be reviewed by a selection committee and their decision is final.
6. To receive scholarship funds recipient will provide to the Kentucky 4-H Foundation proof of enrollment to a post-secondary academic or vocational institution no later than May 31, 2026.
7. Scholarship will be awarded in a check made payable to the applicant, funds can be used for any costs related to their post-secondary education.



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2025 Application

APPLICANT INFORMATION		
Name of Applicant		Birthday/Age
Address		Phone Number
City		Email Address
Zip Code		County
Name of University or Post-Secondary Institution		
Academic Major/Area of Concentration (If Known)		

I certify that the enclosed information is correct and accurate to the best of my knowledge. Additionally, I hereby grant permission to the Kentucky 4-H Foundation to use the photograph enclosed and photographs taken in connection with the scholarship presentation in print and online marking and promotion.

Applicant's Signature

Date

For additional information, please contact: Melissa G. Miller 859-618-9788 or MelissaG.Miller@uky.edu

4-H Membership & Achievement Program

Number of continuous years in Kentucky 4-H: _____	If a participant in the Kentucky 4-H Achievement Program, please _____
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2. What influenced your decision to choose the educational path you are on? (600 words or less)

3. Tell us about one person that was impactful in your life. (600 words or less)

4. How can you better your community? (600 words or less)

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Programs of Kentucky Cooperative Extension serve all people regardless of economic or social status and will not discriminate on the basis of race, color, ethnic origin, national origin, creed, religion, political belief, sex, sexual orientation, gender identity, gender expression, pregnancy, marital status, genetic information, age, veteran status, or physical or mental disability.

