A.B. Graham Memorial Center 2024 Scholarship

*What is the A.B. Graham Center?*

The A.B. Graham Memorial Center was built in 1917 as a school building. The building sat on the same site where A.B. Graham began his career in education.

The present building served the surrounding rural community as a school apart of the Miami East School District until its closure in June 1990. Recognizing the historic significance of the building, concerned citizens rallied to save it. They developed the non-profit organization called, The A.B. Graham Memorial Center.

The mission of the Center is to provide the surrounding rural communities of Miami and Champaign Counties a place to meet, socialize and conduct business while at the same time recognizing the significant work of A.B. Graham, the founder of 4-H Clubs of America.

*Scholarship Requirements:*

* Resident of Champaign or Miami County
* Active participation in 4-H Program
* *2024 Graduating Senior*
* *Continuing education through college or vocational schooling*
* *GPA of 3.0 or higher*

Scholarship application must be turned in by no later than April 1st, 2024. Applications can be mailed to **A. B. Graham Memorial Center Scholarship, *P.O. Box 433, Conover, Ohio 45317*** or email to [abgraham@swohio.twcbc.com](mailto:abgraham@swohio.twcbc.com) Contact Mary Rose 937-214-5562 with questions.

*Scholarship applications can be found on our website* [*http://www.abgraham.org/scholarship-.html*](http://www.abgraham.org/scholarship-.html)

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| --- | --- |
|  | AB Graham Memorial Center |
| 8025 E US Route 36 PO Box 433, Conover, OH 45317 Phone: 937-368-3700 Email: abgraham@swohio.twcbc.com | |

# 2024 Scholarship Application- Due by April 1st, 2024

## Student Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |
| --- | --- |
| Parent or Guardian’s Name: |  |

## Education

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| High School: |  | | | | | GPA after 7 semesters | : | |
| Attach a copy of an official school transcript. Also have your school counselor sign below. | | | | | | | | |
| Counselor signature: | | | | | | | | |
|  | | | | | | | | |
| College/ Technical School: | |  | | | | | |
| Degree/Field of Study: | |  | | | | | |
|  | |  | | | | | | |
| Have you been accepted to this college/school? | | | YES | NO |

## 4-H Involvement

|  |  |  |
| --- | --- | --- |
| Are you a current 4-H member in Miami or Champaign County? | YES | NO |

|  |  |  |  |
| --- | --- | --- | --- |
| 4-H Club Name: |  | Number of years enrolled: |  |
| Advisor(s): |  |  | |
| Attach at least one Letter of recommendation from a 4-H advisor to the application. | | | |
| **Please list all 4-H activities that you have participated in during your 4-H career (camp counselor, junior leader, car teen etc.) Include number of years involved and any offices held.** | | | |
|  | | | |

## Volunteer Work

|  |
| --- |
| Please list any awards you received while participating in 4-H activities. |
|  |

|  |  |
| --- | --- |
| Please list volunteer work that you have participated in within your community: |  |

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| --- |
|  |

## Essay Question

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| --- |
| A.B. Graham was an educator who lived his life working to enrich the lives of those living in rural communities. In a short essay describe how you have used the skills gained through 4-H to impact others through agricultural education. |

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|  |

## Applicant Signature

I certify that my answers are true and complete to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |