

**KENTUCKY EXTENSION HOMEMAKERS ASSOCIATION  
HOMEMAKER SCHOLARSHIP APPLICATION**

**Please fill out and submit three copies of application form and three (3) letters of recommendation to chairman of Scholarship Committee by March 1.**

Chairman: Leadership Development Educational Program Chairman

Name of Applicant \_\_\_\_\_

Home Address \_\_\_\_\_

County \_\_\_\_\_ KY Zip \_\_\_\_\_ Phone(    ) \_\_\_\_\_

Occupation \_\_\_\_\_

Number of children in family \_\_\_\_\_ Number in school \_\_\_\_\_ college \_\_\_\_\_

What is applicant's major? \_\_\_\_\_

Year you will be enrolled Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior \_\_\_

Has applicant applied for other scholarships?    Yes \_\_\_\_\_ No \_\_\_\_\_

List other scholarships awarded to you. \_\_\_\_\_

Approximate gross annual income of family \$ \_\_\_\_\_

List amount you estimate might be available to you from each of the following sources:

Personal savings \_\_\_\_\_ Job \_\_\_\_\_ Other \_\_\_\_\_ Total \_\_\_\_\_

