

To be filled out by the CEA and signed by both the CEA and applicant.



County Extension Agent Verification Form

Applicant Name: _____

CEA Name : _____ CEA Email: _____

County: _____

Club: _____

Years Enrolled in 4-H: _____

Is currently enrolled in 4-H? Yes No

Enrolled in at least 2 of the last 3 years? Yes No

I have reviewed this application, and to the best of my knowledge the information reported is true and accurate.

I have reviewed this application and believe that some or all of the information is NOT true or accurate.

CEA Signature: _____ Date: _____

Applicant Signature : _____ Date: _____

This form must be filled out and signed by the CEA, then uploaded into the scholarship portal by the applicant BEFORE submitting the application by the February 15th deadline.

This form will not be seen by scholarship judges. This form is solely for use by Texas 4-H Foundation and Texas 4-H Program Staff.