

**CLARK COUNTY FAIR ASSOCIATION, INC.  
 TEMPORARY EMPLOYEE SCHOLARSHIP APPLICATION  
 17402 NE Delfel Rd., Ridgefield, WA 98642  
 360-397-6180 – fax 360-397-6185**

**INFORMATION SHEET**

**FOLLOWING ITEMS ARE MANDATORY TO COMPLETE SCHOLARSHIP APPLICATION**  
**ALL ITEMS MUST BE RECEIVED IN THE FAIR OFFICE ON OR BEFORE SEPTEMBER 15, 2013.** It is the applicant's responsibility that ALL ITEMS are received by the deadline date.

- A. Personal Information Sheet;
- B. Parent's/Guardian's Financial Statement, if applicable;
- C. Applicant income and expense statement;
- D. Two letters of Recommendation – see note below regarding recommendations;
- E. Verification Letter from Fair Department in which work was completed and must be a different person than letter of recommendation;
- F. Transcript of High School and latest or current school;

**NOTE: OMISSION OF ANY OF THE ABOVE SIX ITEMS DISQUALIFIES APPLICATION!**

To be eligible to apply for a Clark County Fair Association, Inc. Temporary Employee Scholarship, applicant must have worked for two consecutive years at the Clark County Fair as an employee of FSMG. Dependents of the Clark County Fair Board of Directors and the dependents of the Clark County Event Center employees are eligible to apply for the Clark County Fair Association, Inc. Scholarships.

The awarding of the Clark County Fair Association, Inc. Scholarships will be based on the following criteria:

Community Involvement	20%	Scholastic Ability	25%	Employment	25%
Financial Need	15%	Future Goals and Plans	15%		

**From D** above, two recommendations from instructors or academic advisors where you are **presently enrolled** in school are required. (May use enclosed forms.) **Or** If not enrolled in school, please provide two letters of recommendation from personal or community references. These references cannot be a relative.

**From E** above, the verification letter should be from Fair Dept. Supervisor or other CCFA management personnel. The verification letter from department manager must be a different person than letters of recommendation.

The information received by the Clark County Fair Association, Inc. and/or the Scholarship Committee will be held in the strictest of confidence and shall not be employed for any other purpose.

The check for scholarships awarded will be issued to the college or institution of recipient with the student's name, **following receipt of enrollment and associated costs from the college or institution.**

The scholarship shall be used by the recipient to whom it is awarded and within a reasonable period of time from the date of the award. The Scholarship Committee has the right to rescind the award if not used within a reasonable period.

Signature of Applicant and of Parent/Guardian, if applicable, certifies the information herein is factual, true and correct.

_____ Signature of Applicant		_____ Date		_____ Signature of Parent/Guardian, if applicable		_____ Date	
Name _____		Age _____		Phone _____			
Address _____							
Street		City		State		Zip	
_____ High School G.P.A.	_____ SAT Score	_____ ACT Score	_____ Major (if applicable)		_____ College G.P.A. (if applicable)		
School attending or are planning to attend _____							
Name of Parents, if applicable _____							
Address _____							

### A. PERSONAL INFORMATION SHEET

**Application Deadline: Received in Clark County Fair Office on or before September 15, 2013**

Please write essays to answer the following questions:

**What course do you plan to study?**

**What are your future goals?**

**Why do you desire this scholarship?**

**What does summer employment at the Clark County Fair mean to you?**

**Fair Employment Information:**

Year	Department	Supervisor	Duties
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Schools Attended (High School/College)	Address	Dates of Attendance	Year Graduated
_____	_____	_____	_____
_____	_____	_____	_____

Please describe your work experiences for the last three years (use additional sheets if necessary):

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Please summarize achievements, accomplishments and honors received in school or community activity, with dates (use additional sheets if necessary):

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Please describe an accomplishment within the past two years of which you are most proud:

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**B. PARENT/GUARDIAN FINANCIAL STATEMENT FOR STUDENT OR MINOR, IF APPLICABLE**

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

Was Applicant claimed as a dependent on parents' most recent tax return? Yes \_\_\_\_\_ No \_\_\_\_\_

To best utilize limited resources and to distribute financial assistance in the most equitable manner, the applicant's need must be carefully evaluated. You will greatly assist the Scholarship Committee by providing the information requested below as accurately and completely as possible.

Father: Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother: Name \_\_\_\_\_ Occupation \_\_\_\_\_

Please list below all dependent children (list applicant first), indicate amount of financial support they will receive from you for higher education during the next school year.

Name	Age	Name of School	Year in School	Tuition	Other Support
_____	_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____
_____	_____	_____	_____	\$ _____	\$ _____

Describe below any other financial factors pertinent to your son/daughter's application for a Clark County Fair Association, Inc. Scholarship that you wish the Scholarship Committee and judges to consider (e.g. extraordinary family expenses such as medical, etc):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments:

Name(type or print) \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

### C. APPLICANT INCOME AND EXPENSE STATEMENT

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

**ESTIMATED INCOME**

<b>SOURCE OF FUNDS</b>	<b>AMOUNT</b>
Parents' Help	\$ _____
Summer Work	\$ _____
Work at School	\$ _____
Spousal Help	\$ _____
Other Scholarships (list below)	\$ _____
Loans (list below)	\$ _____
Other (list below)	\$ _____
Relative's Help	\$ _____
R O T C	\$ _____
Savings	\$ _____
Tax Refund	\$ _____
<b>TOTAL ESTIMATED INCOME</b>	<b>\$ _____</b>

Use space below to explain items above:

**ESTIMATED EXPENSES**

<b>USE OF FUNDS</b>	<b>AMOUNT</b>
Food	\$ _____
Rent	\$ _____
Books	\$ _____
Tuition & Fees	\$ _____
Clothing	\$ _____
Incidentals	\$ _____
Time Payments (list below)	\$ _____
Bills (list below)	\$ _____
Travel (list below)	\$ _____
<b>TOTAL ESTIMATED EXPENSES</b>	<b>\$ _____</b>

Use space below to explain items above:

**TOTAL ESTIMATED INCOME**      \$ \_\_\_\_\_

**TOTAL ESTIMATED EXPENSES**      \$ \_\_\_\_\_

**AMOUNT OF NEED**      \$ \_\_\_\_\_

Additional Financial Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SIGNED \_\_\_\_\_  
Applicant

**D. LETTER OF RECOMMENDATION REPORT ON APPLICANT – SCHOLASTIC**

**(Two letters required – Must be received in the Clark County Fair Office on or before September 15, 2013)**

Two recommendations from instructors or academic advisors where you are **presently enrolled** in school are required (may use this form). If **NOT** enrolled in school, please provide two letters of recommendation from personal or community references.

Return to: Clark County Fair Association, Inc.  
Scholarship Committee  
17402 NE Delfel Road  
Ridgefield, WA 98642  
Fax: 360-397-6185  
Email: [chaleen.schuch@clark.wa.gov](mailto:chaleen.schuch@clark.wa.gov)

**Name of Applicant:** \_\_\_\_\_

**Please evaluate the above applicant on the following:**

**A. Integrity** \_\_\_\_\_

\_\_\_\_\_

**B. Industry** \_\_\_\_\_

\_\_\_\_\_

**C. Initiative** \_\_\_\_\_

\_\_\_\_\_

**D. Interest in Study** \_\_\_\_\_

\_\_\_\_\_

**E. Independence of Thought** \_\_\_\_\_

\_\_\_\_\_

**F. Leadership** \_\_\_\_\_

\_\_\_\_\_

**G. Future Promise (academic success)** \_\_\_\_\_

\_\_\_\_\_

**H. Emotional Stability** \_\_\_\_\_

**I. Social Adjustment** \_\_\_\_\_

**J. Financial Need** \_\_\_\_\_

We encourage additional comments in the space below and/or separate pages \_\_\_\_\_

**Name (type or print)** \_\_\_\_\_ **Title** \_\_\_\_\_

**Address** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**E. VERIFICATION LETTER FROM FAIR SUPERVISOR OR MANAGER**

**Must be received in the Clark County Fair Office on or before September 15, 2013**

Return to: Clark  
Fair Association, Inc.  
Scholarship Committee  
17402 NE Delfel Road  
Ridgefield, WA 98642  
Fax: 360-397-6185  
E-Mail: Chaleen.Schuch@clark.wa.gov

County

**Name of Applicant:** \_\_\_\_\_

**Please describe this applicant's Fair employment responsibilities and their performance of their responsibilities. If possible, please include the following characteristics: Initiative; Dependability; Preparedness; Cooperation; Self-starter; Leadership; Willingness to Perform; Attitude; Participation through Years; Punctuality; Work Ethic: Attendance; and Teamwork. Please use the space below and separate sheets if necessary.**

\_\_\_\_\_  
**Name (Type or Print)** **Date**

\_\_\_\_\_  
**Signed** **Title** **Phone**

**Address** \_\_\_\_\_

\_\_\_\_\_