A.B. Graham Memorial Center

8025 U.S. Route Conover, OH 45317 937-368-3700 abgraham@swohio.twcbc.com



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
- \triangle 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 Contact Mary Rose 937-214-5562 with questions.

Scholarship applications can be found on our website http://www.abgraham.org/scholarship-.html

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/Un	it #
	City		State	ZIP Code	
Phone:		Email			
5 , 0					
Parent or G	uardian's Name:				
		Education			
High Schoo	l:		GPA after 7 sem	esters <u>:</u>	
Attach a co	ppy of an official sch	ool transcript. Also have your schoo	ol counselor sign be	low.	
Counselor	signature:				
College/ Te	chnical School:				
Degree/Fiel					
· ·	, <u> </u>				
Have you b	een accepted to this o	YES NO College/school?			
		4-H Involvement		YES	NO
Are you a c	urrent 4-H member in	Miami or Champaign County?			
4-H Club Name:			Number of y	years enrolled:	
Advisor(s):					
Attach at le	ast one Letter of re	commendation from a 4-H advisor to	the application		
Attach at le	east one Letter of rev	commendation from a 4-11 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.				
Please list any awards you received while participating in 4-H activities.				
Volunteer Work				
Please list volunteer work that you have participated in within your community:				
Essay Question				
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.				

	A 11 (A)
	Applicant Signature
I certify that my answers are true and complete	te to the best of my knowledge.
Signature:	Date: