

## **Essex County Farm Bureau Scholarship**

This scholarship is available to any student accepted to a 2 or 4-year college or university and whose family has an active Essex County Farm Bureau membership. The family should have ties to horticultural or agricultural backgrounds, and it is desirable, but not necessary that the student would like to stay connected in some way to the farming community. The scholarship is \$1000 and is awarded by mid May.

Please contact Glenn Cook at (978) 388-4592 for an application.

# Essex County Farm Bureau Scholarship

## Student Application

Name \_\_\_\_\_ Tel.# \_\_\_\_\_

Address \_\_\_\_\_

(Street)

\_\_\_\_\_ (Town)

(State)

(Zip)

B. High School(s) attended last 3 years:

School \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ Date \_\_\_\_\_

C. Name of School or College for which you request scholarship, and desired major: \_\_\_\_\_

D. Father or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ (Town)

(State)

(Zip)

Occupation: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_

E. Number of children in your family attending college: \_\_\_\_\_

F. Scholarships awarded from other sources: \_\_\_\_\_

G. Have you or a family member been involved in horticulture or agriculture?

If yes, what type? \_\_\_\_\_

Number of years involved: \_\_\_\_\_

Your areas of greatest interest: \_\_\_\_\_

What makes you a good candidate for this scholarship and what impact might you have in the areas of agriculture or horticulture in the future? \_\_\_\_\_

\_\_\_\_\_

Please use a separate paper to respond to this question.

H. References:

Academic:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Employment:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Personal:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

I. Please enclose your High School transcripts, including GPA, SAT's, and class standing.

J. Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parents Certification (Please return application by April 25<sup>th</sup>)

We have checked this application for omissions and errors. To the best of our knowledge, the information reported is correct and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Please mail to: Glenn Cook, 201 Market Street, Amesbury, MA 01913

