

2018 Foremost Farms USA®

Agricultural Education Scholarship Application

TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES

Completeness and neatness ensure your application will be reviewed properly

Application postmark deadline February 28, 2018

SCHOLARSHIP AMERICA USE ONLY

I.D. #	AA	PD	RIC/CS	GPA	SATCR	SATM	SATW	ACTC	TOTAL

APPLICANT DATA

Last Name _____ First _____ Middle Initial _____

Permanent Home Mailing Address _____ Apartment # _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ E-mail Address _____

Last Four SS Digits: _____ Date of Birth: Month _____ Day _____ Year _____

Please indicate your status. (For statistical purposes only)

- | | | | |
|------------------------------|--|--|---|
| <input type="radio"/> Male | <input type="radio"/> American Indian/Alaskan Native | <input type="radio"/> Multi-Racial | <input type="radio"/> Native Hawaiian/ Pacific Islander |
| <input type="radio"/> Female | <input type="radio"/> African American | <input type="radio"/> Asian | <input type="radio"/> White |
| | | <input type="radio"/> Hispanic or Latino | |

Check one:

Are you or your parent a member of Foremost Farms USA?

Patron# (must be provided) _____

PARENT OR GUARDIAN INFORMATION

Parents' Names _____

Telephone (_____) _____

Fax Number (_____) _____ Parent's E-mail Address _____

Relationship to Applicant _____ The applicant is a dependent of the member Yes No

HIGH SCHOOL DATA

School Name _____ Graduation Date: Month _____ Day _____ Year _____

City _____ State _____ Telephone (_____) _____

POST-SECONDARY SCHOOL DATA

Name of post-secondary school you attend/plan to attend. (If unknown, please list in order of preference the schools to which you have applied.) **Use official school names. Do not use abbreviations.**

_____ City _____ State _____

_____ City _____ State _____

- | | |
|---|---|
| <input type="radio"/> 4 yr. College or University | <input type="radio"/> 2 yr. Community or Junior College |
| <input type="radio"/> Vocational-Technical School | <input type="radio"/> Other, explain _____ |

Year in school next year: 1 2 3 4 5

Major or course of study _____ Anticipated date of graduation Month _____ Year _____

Anticipated degree: Bachelor's Associate Certificate Other _____

Sending a resumé does not replace any part of this application. If space provided in any section is inadequate, you may continue on additional sheets of paper using the same format. DO NOT repeat information already reported on the application form. Your name, address and name of this scholarship program should be included on all attachments.

YOUR AGRICULTURAL PROGRAM

Family Farm Statistics:

Dairy (Milk Cows) _____ Beef Steers _____ Dairy (Heifers/Calves) _____
 Dairy Steers _____ Beef Cows _____ Other () _____
 Crop Acres: _____ Oats _____ Alfalfa _____ Other () _____

Describe your current role on your family's farm. (You may use a separate sheet of paper)

WORK EXPERIENCE

Describe your work experience during the past four years (e.g., farm work, food server, babysitting, lawn mowing, office work). Indicate dates of employment for each job and approximate number of hours worked each week. List amounts earned at each job.

Employer/Position	From-Mo/Yr	To-Mo/Yr	Hours per Week	Were You Paid? (indicate yes/no)

ACTIVITIES, AWARDS & HONORS

List all activities you have participated in during the past four years such as church, school, community, FFA, 4-H, etc. Note all leadership positions, special awards, honors and offices held. You may use a separate sheet of paper to list additional activities.

Activity	No. of years	Special Awards, etc.	Offices held	Activity	No. of years	Special Awards, etc.	Offices held

FUTURE PLANS

Explain how your involvement in agriculture will help you attain your plans and goals for the future. (You may continue answer on a separate sheet.)

LETTER OF RECOMMENDATION (REQUIRED)

Submit a letter of recommendation with your application. Be sure the letter includes the name, address and telephone number of your reference.

APPLICANT APPRAISAL (REQUIRED)

To be completed by a high school or college counselor or advisor, an instructor, or a work supervisor who knows you well.

Please give immediate and serious attention to the following statements. When complete, please return to applicant. If you prefer, photocopy this section and return to applicant in a sealed envelope. A letter of recommendation does not replace this section.

The applicant's choice of a post-secondary educational program is	<input type="checkbox"/>	extremely appropriate	<input type="checkbox"/>	very appropriate	<input type="checkbox"/>	moderately appropriate	<input type="checkbox"/>	inappropriate
The applicant's achievements reflect his/her ability	<input type="checkbox"/>	extremely well	<input type="checkbox"/>	very well	<input type="checkbox"/>	moderately well	<input type="checkbox"/>	not well
The applicant's ability to set realistic and attainable goals is	<input type="checkbox"/>	excellent	<input type="checkbox"/>	good	<input type="checkbox"/>	fair	<input type="checkbox"/>	poor
The quality of the applicant's commitment to school and/or community is	<input type="checkbox"/>	excellent	<input type="checkbox"/>	good	<input type="checkbox"/>	fair	<input type="checkbox"/>	poor
The applicant is able to seek, find, and use learning resources	<input type="checkbox"/>	extremely well	<input type="checkbox"/>	very well	<input type="checkbox"/>	moderately well	<input type="checkbox"/>	not well
The applicant demonstrates curiosity and initiative	<input type="checkbox"/>	extremely well	<input type="checkbox"/>	very well	<input type="checkbox"/>	moderately well	<input type="checkbox"/>	not well
The applicant demonstrates good problem-solving skills, follows through, and completes tasks	<input type="checkbox"/>	extremely well	<input type="checkbox"/>	very well	<input type="checkbox"/>	moderately well	<input type="checkbox"/>	not well
The applicant's respect for self and others is	<input type="checkbox"/>	excellent	<input type="checkbox"/>	good	<input type="checkbox"/>	fair	<input type="checkbox"/>	poor

Comments _____

Appraiser's Name _____ Title _____ Telephone (____) _____

Signature _____ Organization _____ Date _____

TRANSCRIPT INFORMATION

A complete transcript of grades must be sent with this application. Grade reports are not acceptable.

- Students currently or previously enrolled in college or vocational-technical school must** include all college or vo-tech transcripts of grades from each school attended. On-line transcripts must display student name, school name, grade and credit hours earned for each course, and term in which each course was taken. (Completion of the following section is not necessary.)
- High school seniors and students who have completed less than one full quarter or semester** of post-secondary education **must** include a high school transcript of grades and have the following section completed by the appropriate school official. **(A clear explanation of the school's grading scale must also be submitted.)**

Applicant ranks _____
in a class of _____

Cumulative Grade Point Average	
Weighted:	_____/4.0 scale
Unweighted:	_____/4.0 scale

SAT		
Critical Reading	Math	Writing

ACT				
English	Math	Reading	Science	Composite

School Official's Signature _____ Date _____ Title _____ Telephone (____) _____
School Official's Address: Street _____ City _____ State _____ Zip _____

APPLICATION CHECKLIST

The student is responsible for submitting all materials to Scholarship America on time. This application for a scholarship becomes complete and valid only when you have returned all of the following materials:

- Student Application
 - Current Complete Transcript(s) of Grades (including grading scale)
 - Letter of Recommendation
- All materials, including transcript, must be addressed to:

Foremost Farms USA
Agricultural Education Scholarship Program
Scholarship America
One Scholarship Way
St. Peter, MN 56082
507-931-1682

Postmark deadline February 28, 2018

CERTIFICATION

Scholarship America has the sole responsibility for selecting recipients based on criteria as set forth in the program's descriptive brochure. This application becomes the property of Scholarship America. (We recommend that you keep a copy.)

I acknowledge decisions of Scholarship America are final. I certify that I meet the basic eligibility requirements of the program as described in the brochure and that the information provided is complete and accurate to the best of my knowledge. If requested, I agree to give proof of information I have given on this form. Falsification of information may result in termination of any scholarship granted.

Applicant's Signature _____ Date _____

Parent's Signature _____ Date _____