

Greene County Farm Bureau Scholarship Application

Amount- \$750.00

Eligibility

- Must be a resident of Greene County
- Must be admitted to an approved or accredited school of higher learning.
- Must be planning to study a minimum of one year as a full time student.
- Must be a high school graduate (or equivalent) over the age of 17.
- Parent(s) must be a member of Indiana Farm Bureau for a minimum of two consecutive years prior to the completion of this application.
- Cannot be a previous recipient of this scholarship.

Qualifications

Show:

- Involvement and leadership abilities in all activities.
- Determination to succeed in the student's chosen field.
- Financial need for scholarship.

Application Instructions

- Complete all fields of this application which apply to you.
- Must provide a current transcript of grades.
- Application **MUST** be typed.
- Return completed application to:
sandy.held@infarmbureau.com

Or delivered to

Greene County Farm Bureau

128 E Indiana Avenue, Bloomfield, IN or 9682 W State Road 54, Linton, IN

Application is due by 12:00 noon, May 16, 2018

Scholarship Recipients

Scholarships will be awarded at the Greene County Farm Bureau Annual Meeting. All recipients will be asked to attend. Recipients will need to complete one term prior to monies being awarded. The following information will be needed from recipients.

- Proof of Enrollment in Approved or Accredited school of Higher Learning.
- Transcripts showing that a C average or above has been maintained.
- Proof of Continuing Education
- Address of school where money is to be sent.
- Student ID number, so that money will go to the students account.

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Personal Information

First name:

Middle name:

Last name:

Date of birth:

Address:

City:

Zip Code:

Email address:

Elementary School:

Middle/Jr. High School:

High School:

Graduation Year of High School:

Name of College:

Father/Stepfather Name:

Father/Stepfather Employer:

Mother/Stepmother Name:

Mother/Stepmother Employer:

Number of siblings:

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Post-Secondary Education

Post High School Institution:

Occupation or profession desired:

Have you been accepted for admittance to above school? Yes No

Length of time to complete your post-secondary training:

Work Experience

List last three jobs starting with the most recent.

Company:

Type of work:

Position:

Start date:

End date:

Company:

Type of work:

Position:

Start date:

End date:

Company:

Type of work:

Position:

Start date:

End date:

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Financial and Scholarship Information

Estimated cost for one year of post-secondary training:

Have you received any other scholarships current or past: Yes No

If yes, please list the total amount of all scholarships received.

Amount:

Leadership

Provide your top three leadership positions held while in high school.

Name of High School Club or Organization:

Position Held:

Year Held:

Name of High School Club or Organization:

Position Held:

Year Held:

Name of High School Club or Organization:

Position Held:

Year Held:

Activity Involvement/Honors & Awards

Number of Years in 4-H club:

Number of Years in FCCLA:

Number of Years in FFA:

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List your top three awards received in these activities.

Award:

Year:

Award:

Year:

Award:

Year:

List your top three honors received.

Honor:

Grade level:

Honor:

Grade level:

Honor:

Grade level:

Date of this application:

Month:

Day:

Year:

Write a short essay (300 words or less) describing why you chose this career path:

[Click here to enter text.](#)