

Please Type

SONOMA COUNTY FARM BUREAU AGRICULTURAL SCHOLARSHIP APPLICATION

FULL NAME _____ DATE _____

PERMANENT ADDRESS _____

CITY _____ ZIP _____ COUNTY _____

HOW LONG AT THIS ADDRESS _____ TELEPHONE _____

EMAIL _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

CUMULATIVE HIGH SCHOOL GPA _____ CUMULATIVE COLLEGE GPA _____

PARENT'S OR GUARDIAN'S NAME(S) AND WHERE EMPLOYED:

FATHER'S NAME _____ OCCUPATION _____

MOTHER'S NAME _____ OCCUPATION _____

LIST HIGH SCHOOL, JUNIOR COLLEGE AND COLLEGE(S) ATTENDED (INCLUDING PRESENT SCHOOL) ****Do not include single courses or night school**

HIGH SCHOOL _____ CITY _____

JUNIOR COLLEGE _____ CITY _____

COLLEGE _____ CITY _____

NAME OF COLLEGE, UNIVERSITY, JUNIOR COLLEGE OR TECHNICAL SCHOOL YOU PLAN TO ATTEND _____ INTENDED FIELD OF STUDY _____

FOR WHAT OCCUPATION ARE YOU PREPARING? _____

PLEASE LIST THE AMOUNT AND NAMES OF ANY GRANTS OR SCHOLARSHIPS THAT YOU HAVE BEEN AWARDED FOR THE COMING SCHOOL YEAR

ESTIMATED COST OF SCHOOL YEAR:

TUITION _____ BOOKS _____

FEES & SUPPLIES _____ TRANSPORTATION _____

ROOM & BOARD _____ PERSONAL EXPENSES _____

TOTAL EXPENSE FOR SCHOOL YEAR _____

PLEASE DESCRIBE ANY JOBS YOU HAVE HELD OR WORK YOU HAVE PERFORMED DURING THE PAST THREE YEARS, EITHER FOR YOUR FAMILY, IN PART-TIME JOBS, OR FOR OUTSIDE EMPLOYERS (Attach additional sheet if necessary)

DESCRIBE YOUR INVOLVEMENT IN EXTRACURRICULAR ACTIVITIES IN HIGH SCHOOL (FFA, 4-H, CLASS OR SCHOOL OFFICES, BAND, ORCHESTRA, ATHLETICS, DRAMATICS, DEBATE, ORATORY, SCHOOL PUBLICATIONS, PEP CLUB, ETC.) (Attach additional sheet if necessary)

Activity	Position Held	Hours Spent Per Week	Year
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DESCRIBE YOUR INVOLVEMENT IN ORGANIZED COMMUNITY ACTIVITIES (4-H, FFA, VOLUNTEER EFFORTS, CHURCH GROUPS, OTHER YOUTH ORGANIZATIONS, ETC.) (Attach additional sheet if necessary)

Activity	Position Held	Hours Spent Per Week	Year
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PLEASE LIST ACADEMIC HONORS AND AWARDS (Attach additional sheet if necessary):

PLEASE LIST ATHLETIC HONORS AND AWARDS (Attach additional sheet if necessary):

ARE THERE ANY CIRCUMSTANCES THAT MIGHT INCREASE YOUR NEED OF SCHOLARSHIP CONSIDERATION?

SIBLINGS PRESENTLY LIVING AT HOME (Name and Age)

SIBLINGS PRESENTLY ATTENDING COLLEGE OR TECH SCHOOL (Name, Age and School)

PLEASE ATTACH TWO LETTERS OF RECOMMENDATION from a teacher, 4-H leader, FFA advisor, school principal or employer (must have been written within the last six months, include applicants name and may not be written by a parent or close relative), PERSONAL STATEMENT OF NOT MORE THAN TWO TYPED PAGES, DOUBLE-SPACED AND COPY OF TRANSCRIPT.

Applications due by 5 p.m. Friday, April 13, 2012.

All of the information provided on this application is true and complete to the best of my knowledge. I certify that I am applying for full-time enrollment to either a four-year College or University or a two-year Community College. I have read and understand the Criteria of this scholarship program. I have included a complete set of the application and required documents. I understand that the selection of scholarship recipients is at the sole discretion of Farm Bureau Foundation of Sonoma County.

Applicant Signature _____ Date _____