Fulton County Farm Bureau, Inc. Scholarships

The scholarships have been created to recognize an outstanding individual from each school district in the county. It is our desire to assist young people to further their education and training.

General Information and Rules:

1) There shall be three $300 scholarships awarded in Fulton County. Should a school not have an applicant, we may award more than one to the remaining schools.

2) The board of directors of Fulton County Farm Bureau, Inc. will be in charge of awarding the scholarships.

3) Applications shall be held in strict confidence.

4) Scholarship applicant’s family must be a minimum 1 year member of Fulton County Farm Bureau Inc. The applicant must be a resident of Fulton County, and a high school senior.

5) Scholarships shall be selected on the following criteria:
   A) Transcript of grades
   B) Leadership Ability
   C) Applicants interest in agriculture
   D) Need

6) Fulton County Farm Bureau, Inc. will present the award in a timely manner to the qualified recipient and may utilize the sponsoring organizations name and the recipient’s name and/or photo in advertising material.

7) The award will be given after the successful completion of the first term and after enrollment for the second term at an accredited university, college, or trade school.

8) The scholarship check shall be drawn in the recipient’s name.

9) It is the applicants responsibility to return completed application to the Fulton County Farm Bureau office at 230 East Ninth Street, Rochester, IN 46975 by March 2nd.
Name __________________________________________ Date ____________________

last first middle

Address __________________________________________

street city county

Phone# ________________________________

Sex: Male___ Female___ Birth Date__________________________

Father’s name ____________________________________________

Father’s employer ____________________________ Position __________________

Mother’s name ____________________________________________

Mother’s employer ____________________________ Position __________________

Please give the number of dependents in the family:

Preschool ______ Elementary school _______ Middle school ________

High school _______ Higher education _______ Other _______

Name of high school now attending______________________________

Name of school you plan to attend______________________________

Estimated cost per year______________________________

Job experience or current employment______________________________

List by year all school activities in which you have participated and any honors you have received.

__________________________________________________________

__________________________________________________________

__________________________________________________________
List other activities you have participated in____________________________________
________________________________________________________________________
________________________________________________________________________

Why would you like to receive this scholarship?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

What do you plan to study?_________________________________________________  

What are your plans after completing your education?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

(You may use additional pages to answer the above questions if necessary)

*Please include a photograph.
*Please include two reference letters.

We certify that the information on this application is an accurate and true statement.

Date_________________________________ Student_________________________________

Parent________________________________________
To be filled out by the Guidance Counselor:

Student’s rank _______ in a class of ____________

Sat test scores: Verbal ______ Math___________

*PLEASE INCLUDE TRANSCRIPT*

Other tests _________________________________________________________________

Counselor:
List possibilities of other scholarships available to this student and any additional comments that you feel the selection committee should consider.

________________________________________________________________________

________________________________________________________________________

Date____________ Signature______________________________________________

To be filled out by the Principal:

Principal’s estimate of applicant’s success, based on the purpose of this applicant.

Little success________ May encounter some difficulty________

Average_______ Above average_______ Superior_______

Principal’s Recommendation:

Recommended_______ Not Recommended_______

Date____________________Signature________________________________________