



"Working with you"

**STEWARTVILLE | ELGIN | EYOTA | VIOLA | PLAINVIEW | ST. CHARLES | KELLOGG
2021 Scholarship Application**

Applicant Name: _____ Parent/Guardian: _____

Applicant Address: _____

E-Mail Address: _____ Home Phone Number: _____

Current School Attending: _____

Name of school you plan on attending next year: _____

Location of School: _____ Intended Major: _____

Work Experience:

Please list information for work experience for the last four years (e.g., babysitting, lawn mowing, office work, food server). This can include volunteer work (hospital volunteer, Special Olympics). If the space provided is inadequate, you may continue on additional sheets. Please follow same format on additional sheets.

Employer	Location	Position/Type of Work	From (Mo/Yr)	To (Mo/Yr)	Hrs. per Week

School and Community Activities, Awards and Honors:

Please fill in information on activities participated in during the last four years (e.g. athletics, music, 4-H, FFA, boy/girl scouts). Note awards, honors or offices held. If the space provided is inadequate, you may continue on additional sheets. Please follow same format on additional sheets.

Activity/Organization	Number of years active	Special Awards, honors	Offices Held



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Transcript and Academic Information: *Please attach a copy of your most recent transcript. A clear explanation of the school's grading scale must also be submitted.*

Grade point average for most recent quarter/semester completed: _____

Cumulative grade point average: _____

Goals and Aspirations: *Briefly state a summary of your plans as they relate to your educational and career objectives and your long-term goals.*

Essay Question: *Attach a separate page answering one of the following questions:*

Option 1: What does sustainable agriculture mean to you?

Option 2: Why is supporting local farmers important?

Certification: I acknowledge decisions of the scholarship selection committee are final. I certify I meet eligibility requirements.

Applicant's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



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2021 Applicant Appraisal

To the Applicant: This section should be completed by a non-relative adult who knows you well (high school counselor, organization advisor/instructor/coach, work supervisor).

To the Adult Appraiser: Please give serious attention to the following statements. When complete, please return to the applicant in a sealed envelope. The applicant will submit this portion as part of their full application.

Applicant Name:

Form with 8 rows of appraisal statements and checkboxes for response categories.

Comments:

Four horizontal lines for writing comments.

Appraiser's Name: _____

Title: _____

Organization: _____

Telephone: _____

Signature: _____

Date: _____