



# SCHOLARSHIP APPLICATION - 2020

Name: \_\_\_\_\_  
First Middle Last Name

Home Address: \_\_\_\_\_

City/State/Zipcode: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent or Guardian (if applicable): \_\_\_\_\_

Address of Parent or Guardian (if different from your address):  
\_\_\_\_\_

Parent, Guardian or Yourself is a: \_\_\_\_\_ Direct Patron of First District Association  
\_\_\_\_\_ Creamery Member Patron  
\_\_\_\_\_  
(Name of Member Creamery)

School you are or will be attending: \_\_\_\_\_

Major or Course of Study: \_\_\_\_\_

Length of program (example: 18 months, 2 years, 4 years, graduate program):  
\_\_\_\_\_

**Please respond to the following questions on a separate page (2 page maximum).**

1. Describe why you are interested in pursuing further education in either the agriculture or food science area?
2. Summarize briefly your organizational and community experience(s) that are related to your chosen course of study. (Example: 4-H, FFA, school activities, church, agriculture related activities, leadership activities).
3. How do you expect to use the knowledge and experience gained through your education to contribute to contribute to agriculture today & will into the future?

Please include 1 letter of recommendation and either your high school or current college grade transcript with the application. **Applications must be submitted to FDA by April 1, 2020**