



SCHOLARSHIP APPLICATION - 2021

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, 2021.**

**First District Association
101 S Swift Ave
Litchfield, MN 55355**

Or email Donna at: DShepersky@firstdistrict.com