

Name:		
First	Middle	Last
Home Address:		
City, State and Zip code:		
Telephone:	Email:	
Parent or Guardian (if applicable):		
Address of Parent or Guardian (if different fr		
Parent, Guardian, you, or employer are a:	Direct Patron of First Creamery Member Pa	
(Name of N	Member Creamery)	
School you are or will be attending:		
Major or Course of Study:		
Length of program (18 months, 2 years, 4 years)	ars, graduate program) and whe	n you start(ed):
Please respond to the following questions o	on a separate page (2 page maxi	mum).
 Describe why you are interested in purs Please describe your future plans, and h and in the years to come? Summarize your organizational and com course of study. (Example: 4-H, FFA, sch leadership activities, etc.). 	how you will contribute to the dan nmunity experience(s) that are r	airy and ag industries today elated to your chosen
Please include one (1) letter of recommenda transcript, and a photo of yourself. Applicati First District Association 101 S Swift Ave		by April 1, 2023.
Litchfield, MN 55355 Each year, First District Association selects up	p to 10 recipients for their schola	rship, each worth \$1,000.

Each year, First District Association selects up to 10 recipients for their scholarship, each worth \$1,000 Those who have received a First District Scholarship in the past are not eligible to receive another scholarship.