



BOONE AREA CHAMBER OF COMMERCE Ag Committee F-F-A SCHOLARSHIP

ELIGIBILITY REQUIREMENTS

- (1) BOONE COUNTY RESIDENT
- (2) GRADUATING SENIOR
- (3) HAVING PARTICIPATED IN FFA FOR AT LEAST TWO YEARS
- (4) PURSUING A 2-4 YEAR DEGREE IN AN AG-RELATED MAJOR

- | | |
|----------------------------|----------------------|
| ▪ AMOUNT OF AWARD | \$250 |
| ▪ NUMBER OF AWARDS | 1 MINIMUM |
| ▪ DEADLINE FOR APPLICATION | May 1st, <u>2014</u> |

NO APPLICATIONS WILL BE ACCEPTED AFTER APPLICATION DEADLINE.

SCHOLARSHIP WILL BE PAID DIRECTLY TO SCHOOL OF CHOICE UPON THE START OF SECOND SEMESTER OF FRESHMAN YEAR OF COLLEGE.

SEND APPLICATIONS TO:

**BOONE AREA CHAMBER OF COMMERCE AG COMMITTEE
903 STORY STREET
BOONE, IOWA 50036**

SCHOLARSHIP APPLICATIONS ARE AVAILABLE AT THE BOONE COUNTY ISU EXTENSION OFFICE, BOONE HIGH SCHOOL, OR THE BOONE AREA CHAMBER OF COMMERCE OFFICES.

YOU CAN ALSO DOWNLOAD THE APPLICATION AT www.Boonelowa.us under "CHAMBER OF COMMERCE EVENTS, COMMITTEES AND GROUPS."

**BOONE AREA CHAMBER OF COMMERCE
Ag Committee F-F-A SCHOLARSHIP**

SCHOLARSHIP APPLICATION
PLEASE TYPE OR PRINT NEATLY
(TO BE RETURNED TO BOONE COUNTY EXTENSION OFFICE)

APPLICANT DATA

NAME (LAST) (FIRST) (MIDDLE)

PERMANENT ADDRESS (STREET) CITY STATE ZIP

DATE OF BIRTH (MO/DAY/YR) TELEPHONE NUMBER

NAME OF PARENT(S)/GUARDIAN(S)

PERMANENT ADDRESS OF PARENT(S)/GUARDIAN(S) (IF DIFFERENT FROM ABOVE)

TELEPHONE NUMBER OF PARENT(S)/GUARDIAN(S) (IF DIFFERENT FROM ABOVE)

POST-SECONDARY SCHOOL DATA

NAME OF POST SECONDARY SCHOOL FOR WHICH SCHLORSHIP IS REQUESTED

POST-SECONDARY SCHOOL ADDRESS (CITY, STATE, ZIP)

MAJOR FIELD OF STUDY APPLICANT PLANS TO PURSUE_____

STUDENT WILL: ___LIVE ON CAMPUS ___LIVE OFF CAMPUS ___COMMUTE

STUDENT WILL BE ENROLLED: _____ LESS THAN 1/2 TIME.
 _____ 1/2 TIME OR MORE.
 _____ FULL-TIME

ANTICIPATED START OF POST-SECENDARY PROGRAM _____
 MONTH YEAR

HIGH SCHOOL TRANSCRIPT INFORMATION

THE FOLLOWING SECTION SHOULD BE COMPLETED BY YOUR GUIDANCE COUNSELOR.

APPLICANT RANKS _____ IN A CLASS OF _____ CUMULATIVE GPA_____.

SAT VERBAL_____ MATH_____

ACT ENGLISH_____ MATH_____

SCHOOL OFFICIAL'S SIGNATURE/TITLE DATE TELEPHONE NUMBER

PERSONAL DATA

LIST ANY WORK EXPERIENCE DURING GRADES 9 – 12.

<u>POSITION</u>	<u>YEAR(S)</u>	<u>HOURS PER WEEK</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

LIST ALL SCHOOL AND COMMUNITY ACTIVITIES IN WHICH YOU HAVE PARTICIPATED DURING GRADES 9-12. INDICATE ALL SPECIAL AWARDS AND HONORS.

<u>ACTIVITY</u>	<u>YEAR(S)</u>	<u>AWARDS/HONORS</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

YOUR PLANS AS THEY RELATE TO YOUR EDUCATIONAL AND CAREER OBJECTIVES AND FUTURE GOALS:

APPLICANT APPRAISAL

STUDENT NAME _____.

TO BE COMPLETED BY HIGH SCHOOL TEACHER, PRINCIPAL, COUNSELOR, OR OTHER SUPERVISOR.

TO THE APPRAISOR: YOU HAVE BEEN ASKED TO PROVIDE CONFIDENTIAL INFORMATION IN SUPPORT OF THE APPLICATION FOR A SCHOLARSHIP. PLEASE COMPLETE THE FOLLOWING STATEMENTS BY CHECKING THE ANSWER WHICH ACCURATELY DESCRIBES THE STUDENT. **PLACE COMPLETED EVALUATION FORM IN SEALED ENVELOPE AND PLACE SIGNATURE ACROSS THE SEAL.**

THE APPLICANT'S CHOICE OF POST-SECONDARY EDUCATION PROGRAM IS _____ APPROPRIATE.

_____ EXTREMELY _____ VERY _____ MODERATELY _____ NOT VERY

THE APPLICANT'S ACHIEVEMENTS REFLECT HIS/HER ABILITY _____ WELL.

_____ EXTREMELY _____ VERY _____ MODERATELY _____ NOT VERY

THE APPLICANT'S ABILITY TO SET REALISTIC AND ATTAINABLE GOALS IS _____

_____ VERY GOOD _____ GOOD _____ FAIR _____ POOR

THE QUALITY OF THE APPLICANT'S COMMITMENT TO SCHOOL AND COMMUNITY IS _____

_____ VERY GOOD _____ GOOD _____ FAIR _____ POOR

THE APPLICANT IS ABLE TO SEEK, FIND, AND USE LEARNING RESOURCES _____ WELL.

_____ EXTREMELY _____ VERY _____ MODERATELY _____ NOT VERY

THE APPLICANT DEMONSTRATES CURIOSITY AND INITIATIVE _____ WELL.

_____ EXTREMELY _____ VERY _____ MODERATELY _____ NOT VERY

THE APPLICANT DEMONSTRATES GOOD PROBLEM-SOLVING SKILLS, FOLLOWS THROUGH, AND COMPLETES TASKS _____ WELL.

_____ EXTREMELY _____ VERY _____ MODERATELY _____ NOT VERY

THE APPLICANT'S RESPECT FOR SELF AND OTHERS IS _____.

_____ VERY GOOD _____ GOOD _____ FAIR _____ POOR

COMMENTS: _____

SCHOOL OFFICIAL'S SIGNATURE/TITLE

DATE

TELEPHONE NUMBER