Washington County Farm Bureau Scholarship Eligibility Requirements

- 1. Members of the Washington County Farm Bureau (for at least one year), their children, step-children, grandchildren or step-grandchildren, who are:
- 2. Current graduating high school seniors planning full-time enrollment at an accredited university, college, community college, junior college, or technical school; or
- 3. Currently enrolled full-time at an accredited university, college, community college, junior college, or technical school.
- 4. Completed applications are due by **Friday**, **March 15**, **2019** in the Washington County Farm Bureau office, 1165 N. Meadowlands, Fayetteville, AR 72704. Applications available at same address or call 479-442-4266.

The intention of the Washington County Farm Bureau Scholarship is to encourage hard-working, determined students. We are proud of our top achievers, but do not want to overlook others that may need an encouraging helping hand. Special consideration will be given to those studying in agriculture, family life sciences, or medical fields.

This one-time annual scholarship of \$1,000 is payable in increments of \$500 for two semesters, with the recipients to be recognized at the Washington County Farm Bureau annual meeting. The number of scholarships given will be determined by the Washington County Farm Bureau Scholarship Committee and funds available.

Washington County Farm Bureau 1165 N. Meadowlands, Fayetteville, Arkansas 72704

SCHOLARSHIP APPLICATION FORM

Name of Farm Bureau mem	iber					
Member NumberRelationship to Applicant						
I am a High School Senior_	I am in Co	ollege	l am i	n Technical School	**********	
College/University/Technica	ıl School (in which	enrollin	g):			
Department Enrolled						
Major	Minor					
Applicant's Full Name						
Applicant's Full Name	Fer	male	Male	Marital Status	***************************************	
Home Address (legal)				and the second s		
Mailing address (if different	f)				***************************************	
City	Sta	ate	Zip	Phone	***************************************	
Email	StateZipPhone Cell phone					
High					-	
School						
School Years in 4H	Years in FFA		Years in	FCCLA		
			-	***************************************		
Devend and Family	Into					
Personal and Family	Information					
Please indicate the percent	of financial rooman	aibilit <i>i</i> f	er vour oduo	ations		
You Parent(s)			n your educ	alion.		
l ist other echolorchine and	financial aid if any					
List other scholarships and						
Do you plan to work part-tir	ne? (If yes, how m	any hou	rs per week)			
			·			
Father's Name Address						
Address		AUU				
Occupation		Occi				

Personal and Family Information (continued)

Numbe	r of children in family, including yourself r of siblings in college, <u>not</u> including yourself r of parents
From p the follo judges)	revious years' tax returns, parent(s) 3-year average adjusted gross income. Check one of owing categories below: (may be submitted in a sealed envelope to be opened only by the
	Below \$30,000 \$30,000 - \$45,000 \$45,000 - 60,000 \$60,000 - \$75,000 \$75,000 - \$90,000 Over \$90,000
	e are any other circumstances that should be considered, please list here. Examples might ious illnesses, single parent, etc.

***Inc	complete applications will not be judged!!! Make sure you have included the following:
Place	Checkmark if included:
No. ACCOUNTS TO THE	In an essay of one page or less, indicate your career objectives, why you chose this career, and how you plan to accomplish it.
placini di Propinsi Annies	A copy of your transcript(s) from high school and/or college.
aggargescollecture	ACT scores in a sealed envelope from your school. *** If you are in college, include a college transcript as well as your high school transcript and ACT scores.
parameters (1990)	Your completed application.
	A resume which tells about your clubs, activities, leadership positions, community service, work experience, etc.