



765 MAIN STREET  
HALF MOON BAY  
CALIFORNIA 94019  
(650) 726-4485

# Scholarship Application

Deadline: Friday, March 29, 2024

**Instructions and information for Applicants.** This sheet is designed to be helpful to students in the processing of an application for scholarship of the San Mateo County Farm Bureau.

Read carefully before filling out the application blank.

## DIRECTIONS FOR FILLING OUT THE APPLICATION BLANK

1. Please read through the application carefully to understand the information needed to complete the form.
2. Use black ink when filling out the application or fill out application online at: <http://www.sanmateofarmbureau.org/programs/>
3. Answer all questions. If a particular item does not apply to you, write in N/A.
4. Re-read the parts you filled out and check for accuracy, completeness, and neatness.
5. Each applicant is required to ***submit a photograph with this application*** which may be used for publicity purposes should you receive an award.
6. Mail completed application to: San Mateo County Farm Bureau, 765 Main Street, Half Moon Bay, CA 94019.
7. **All applications must be** completed and **received** at the above address by **Friday, March 29, 2024** in order to be eligible for consideration.

## ELIGIBILITY

1. Be a San Mateo County Farm Bureau member, dependent or collegiate (youth) member.
2. Be currently attending college or graduating high school senior who will be attending college the following year and majoring in an agriculture-related subject.

## IMPORTANT: THESE DOCUMENTS MUST ACCOMPANY THIS APPLIATION

1. Two letters of recommendation:
  - a. Someone connect with your college or high school who will evaluate you as a student.
  - b. Someone in your community who will evaluate you as a citizen.
2. Sealed transcript of grades from the registrar of your high school and college or university if applicable.

**APPLICATION FOR SCHOLARSHIP**

1. Name: \_\_\_\_\_  
 Last First Middle

2. Home Address: \_\_\_\_\_ Telephone # \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ email: \_\_\_\_\_

3. Mailing Address (if different from above): \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Telephone # \_\_\_\_\_

3. San Mateo Co. Farm Bureau Membership #: \_\_\_\_\_ Name: \_\_\_\_\_

4. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

5. Sex: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Spouses Name: \_\_\_\_\_

6. Name and Address of Parents: \_\_\_\_\_  
 \_\_\_\_\_

8. Occupation of Parents/Spouse: \_\_\_\_\_

9. Names of Sisters and Brothers	Age	School Attending
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. High School/College now attending: \_\_\_\_\_

List the colleges you have applied to if you are not presently attending:  
 \_\_\_\_\_  
 \_\_\_\_\_

11. List extracurricular high school/college activities: \_\_\_\_\_  
 \_\_\_\_\_

12. List any academic honor or scholarships you received in high school/college: \_\_\_\_\_  
 \_\_\_\_\_

13. For what business or profession are you preparing: \_\_\_\_\_

14. Do you have experience in the agricultural industry? \_\_\_\_\_ If yes, describe briefly: \_\_\_\_\_  
 \_\_\_\_\_

15. Are you presently employed? \_\_\_\_\_ If so, give name and address of employer, hours worked per week

and brief description of duties: \_\_\_\_\_

17. Do you expect to work during the coming summer vacation? \_\_\_\_ If so, supply information as to such expected employment: \_\_\_\_\_

18. If married, is your spouse employed? \_\_\_\_\_ If so, annual earnings: \_\_\_\_\_

19. Please state below your annual anticipated income and expenses for coming school year. Be specific on all items. Additional data may be attached.

**EXPENSES**

Tuition/Fees \_\_\_\_\_

Room & Board \_\_\_\_\_

Books & Supplies \_\_\_\_\_

Social (Frat., Sor., etc.) \_\_\_\_\_

Personal Debt Payments (Specify)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Transportation (Car Payment, Insurance)

\_\_\_\_\_

\_\_\_\_\_

Misc. Expenses (Specify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INCOME**

Earnings: Summer \_\_\_\_\_

Between Quarters \_\_\_\_\_

During School Year \_\_\_\_\_

Total Earnings \_\_\_\_\_

Husband's or Wife's Earnings \_\_\_\_\_

Aid from Family \_\_\_\_\_

G.I. Bill \_\_\_\_\_

Loans (Specify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scholarships (By Name and Amount)

\_\_\_\_\_

\_\_\_\_\_

Aid from Other Sources (Specify)

\_\_\_\_\_

\_\_\_\_\_

20. Please state below (or attached) in letter form why you are applying for this scholarship. Cover both financial need and academic promise.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

ALL INFORMATION WILL BE KEPT CONFIDENTIAL