

AGRICULTURE RELATIONS COMMITTEE HIGHER EDUCATION SCHOLARSHIP INFORMATION

For students planning careers in agriculture related fields.

SCHOLARSHIP TOTALING \$1000

The scholarship will be provided for students preparing for careers in agriculture related fields. Eligibility is limited to current students who reside in the Brookings trade area as determined by the Brookings Chamber Agriculture Relations Committee and enrolled in any accredited university, college, technical school or other recognized program in an agriculture related field. Prior Chamber scholarship recipients are not eligible.

Forms must be filled out and printed in black ink or typewritten and returned along with two letters of recommendation (in addition to the Page 3 "school official's statement"), by April 15th of current year to:

Brookings Area Chamber of Commerce

Ag Relations Committee

415 8th Street South

Brookings, SD 57006

For more information please contact the Brookings Area Chamber of Commerce.

BRING
YOUR
DREAMS



AGRICULTURE RELATIONS COMMITTEE

HIGHER EDUCATION SCHOLARSHIP APPLICATION

SECTION 1. APPLICANT INFORMATION

Applicant's Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Current Address (if different): _____

City: _____ State: _____ Zip: _____

Current Phone: _____

Email Address: _____

Do you currently or have you in the past lived on a Ranch/Farm: _____

Parents/Guardians Names: _____

Major or area of study: _____

High School Attended: _____
(Name) (City) (State)

High School Graduation Date: _____ High School GPA: _____

SECTION 2. APPLICANT NARRATIVE

Please provide a 1-2 paragraph response for the following. Use additional sheets if needed.

1. List Major School Activities (offices held, committees, etc.):

2. Non-School Organizations (leadership roles in each):

3. Community Activities:

4. Briefly Describe:

A. Why you are choosing an agriculture related vocation:

B. How do you plan to contribute to agriculture in the Brookings trade area:

Applicant Name: _____



**THIS PORTION OF THE APPLICATION IS TO
BE COMPLETED BY A SCHOOL OFFICIAL:**

The Applicant is scheduled to graduate on: _____

Institution Attending: _____

Major or area of study: _____

Applicant's:

Overall Grade Point Average: _____

Total Credits Earned: _____

Previous grading period Grade Point Average: _____

Previous grading period Credits Earned: _____

Printed Name of School Official: _____

Title of School Official: _____

Signature of School Official: _____