

**San Luis Obispo County Foundation for Agriculture Awareness**

**California Mid-State Fair Heritage Foundation**

**2024 Scholarship Application**

**1. Source of Scholarship:**

San Luis Obispo County Foundation for Agriculture Awareness & California Mid-State Fair Heritage Foundation.

**2. Selection of Recipient:**

The Scholarship Committee is comprised of members of both foundations.

**3. Disbursement of Award:**

The Scholarship will be made payable by the Foundations to the Scholarship winner(s) upon confirmation of enrollment.

**4. Qualifications:**

- ✦ Student must have participated in the California Mid-State Fair within three (3) years prior to application.
- ✦ Student must fulfill entrance requirements to the school of his/her choice.
- ✦ This scholarship is available for the actual educational needs of the applicant in a University, College, Professional, or Vocational school of his/her choice.
- ✦ Applicant must enroll or be enrolled as a “full time” student – (12 units).
- ✦ Applicant must have purposeful educational goal.
- ✦ Application must be postmarked by **April 22, 2024** hand delivered must be received by **April 29, 2024**.
- ✦ Applicant must be available for possible personal interview, if necessary.
- ✦ Completed application is to be returned to SLO Co. Foundation for Agriculture Awareness, 4875 Morabito Place, San Luis Obispo, CA 93401

**5. Questionnaire:** Please type or handwrite (in **BLACK INK**) to answer the following.

A. Name: \_\_\_\_\_

B. Home Address: \_\_\_\_\_

C. Telephone Number: \_\_\_\_\_

D. SS#: \_\_\_\_\_

E. Date of Birth: \_\_\_\_\_

F. Present School & Grade: \_\_\_\_\_

G. Name and address of Father or Guardian: \_\_\_\_\_

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H. Name and address of Mother or Guardian: \_\_\_\_\_

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I. Married:      Yes      No

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Name and address of Guardian, Husband, or Wife:

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J. Occupation or Profession of Father, Mother, Guardian, Husband or Wife:

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K. Names of dependent children in family & age of each:

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L. How have you participated in the California Mid-State Fair? Please list years and describe activities:

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M. List any work experience, if any.

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N. What have you done towards acquiring funds for furthering your education?

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O. How do you plan to support yourself while attending school?

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P. What financial assistance will be available from your family?

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Q. Give an estimate of your expenses for the coming school year? Tuition/ Fees, Books, Room/ Board, and other expenses.

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R. How much will you be able to contribute towards defraying costs?

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S. Have you applied for any other scholarship?      Yes      No

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Are you currently receiving any scholarships? \_\_\_\_\_ Yes      \_\_\_\_\_ No      \_\_\_\_\_ Unknown  
If yes, how much? From whom?

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T. What school do you plan to attend? First choice:

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Second choice: \_\_\_\_\_

Third choice: \_\_\_\_\_

U. Do you plan to live on campus? \_\_\_\_\_ Yes \_\_\_\_\_ No

At Home? \_\_\_\_\_ Yes \_\_\_\_\_ No

V. What will be your major? Why have you chosen this course of study?

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W. List your activities in school, church and community:

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**6. Essay**

Please include a **HANDWRITTEN** 500-word essay on: My involvement in 4-H and/or FFA and participating in the Mid-State Fair has helped to shape my educational and career goals. Specifically articulate your motivation in setting those goals. The essay should be *well organized and grammatically correct*. **Please SIGN the essay at the bottom.**

**7. Transcript**

Include a copy of your end-of-the-year school transcript.

**8. Certification and release of information:**

I certify that all information on this application is true, complete and accurate to the best of my knowledge; that **I will be a full-time student** (12 units-undergraduates, 8 units- graduates) during the period of the award; and that my scholarship money will be used for expenses related to my education.

**9. Revocation**

If the scholarship is not claimed within a year from notification of the award, the Committee reserves the right to revoke the scholarship.

**10. I hereby authorize the above Foundations to publicly acknowledge the scholarship award.**

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

## 11. Letter of Recommendation

- ✦ **A parent, relative or another student may not** be used as a reference.
- ✦ Please include **two – three** letters of recommendations with the scholarship application and mail directly to the SLO Co. Foundation for Agriculture Awareness.
- ✦ Please include a copy of this page for **EACH** letter of recommendation.
- ✦ Please include the reference’s name and phone number, so the Committee may contact them to discuss this recommendation.
- ✦ Letter of Recommendation must be postmarked by **April 22, 2024**; hand delivered must be received by **April 29, 2024**.

Please include the following in the recommendation:

- A. How long have you known the applicant and under what circumstances have you become familiar with the applicant’s academic capabilities?
- B. Please assess the applicant’s exceptional achievements and ability to contribute to the University’s learning environment.
- C. Indicate the applicant’s potential for success, leadership skills and specific areas of interest.
- D. Describe adverse circumstances the student has overcome to succeed.
- E. How would you rate the applicant’s motivation and initiative in pursuing academic and career goals?

Overall Rating (Check one):

\_\_\_\_\_ Strongly Recommend \_\_\_\_\_ Recommend \_\_\_\_\_ Recommend with Reservation

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Signature

Date

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Name (Please Print)

Title (Institution/ Employer)

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Address

Phone