

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

**California Mid-State Fair Heritage Foundation**

**2022 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 1, 2022** hand delivered must be received by **April 8, 2022**.
- ✦ 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 1, 2021**; hand delivered must be received by **April 10, 2021**.

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