

# ELKTON FFA ALUMNI SCHOLARSHIP APPLICATION

## I Applicant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Street Address & PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FFA Chapter Name \_\_\_\_\_  YES  NO  
Current FFA Member? \_\_\_\_\_ Date Chapter Degree Received \_\_\_\_\_

## II Student Certification

- At the time of the application, I am currently a senior.  Yes  No
- I will be a full-time college student in the fall of \_\_\_\_\_
- My intended career field is: \_\_\_\_\_
- I intend to receive my degree from a:  
 state college or university  private college or university  
 community college  vocational/technical school
- The highest undergraduate degree I plan to obtain is a:  
 2 year  4 year  vocational/technical
- My major field of study will be: \_\_\_\_\_
- The college(s) I am interested in attending in the fall of the next calendar year:  
1 \_\_\_\_\_ 2 \_\_\_\_\_  
3 \_\_\_\_\_
- Describe your future plans - school, career, etc.

## III Academic Information

RANK: This applicant's class rank is \_\_\_\_\_ in a senior class of \_\_\_\_\_ students.  
GPA: Cumulative GPA of \_\_\_\_\_ on a 4.0 scale. SAT score \_\_\_\_\_ or ACT score \_\_\_\_\_

## IV Supervised Agricultural Experience Program (SAE)

A. Explain how you started your SAE, how it has developed and what you have learned during the process.

B. Describe the type of work, responsibility or career activities that became a part of your SAE while in FFA. Depending on the nature of each responsibility, the terms used to describe may include hours worked, number of acres, head of livestock, earnings, etc.

Year	Type of Work or Enterprise, Major Responsibilities or Career Activities	Size/Scope	% Ownership
<u>Year 1</u> Mo. _____ Yr. _____ to Dec. 31, YR. _____			
<u>Year 2</u> Mo. _____ Yr. _____ to Dec. 31, YR. _____			
<u>Year 3</u> Mo. _____ Yr. _____ to Dec. 31, YR. _____			
<u>Year 4</u> Mo. _____ Yr. _____ to Dec. 31, YR. _____			

C. Project record book must be submitted with application.

**V Leadership Activities**

A. List major FFA activities (offices held, committee assignments, awards, competitions, etc).

One entry per line, specifying the year and level(s) of participation. (attach additional page if needed)

Activity	Local/Chapter				Area/District				State				National			
	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR	YR
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B. List major non-FFA school and community activities and/or achievements that were helpful in making you a more involved and contributing individual to your school and community. These may include class offices, clubs, extracurricular, church and volunteer activities. **DO NOT** duplicate items listed in section A above. One entry per line, please. (attach additional page if needed)

Activity	Year	Year	Year	Year
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2				
3				
4				
5				
6				
7				
8				
9				
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11				
12				
13				
14				
15				

## VI Student Statement

In the space below, explain why the scholarship committee should select you for a scholarship.

## VII Personal References

	<u>NAME</u>	<u>PHONE NUMBER</u>
1	_____	_____
2	_____	_____
3	_____	_____

## IX Certification and Signatures

- A. I hereby certify that all academic information submitted on this application by the applicant is true and correct to the best of my knowledge.

\_\_\_\_\_  
School Principal/Counselor Name (Printed)

\_\_\_\_\_  
School Principal/Counselor Signature (Required)

- B. Scholarship recipients agree to the use of their names, likenesses & information contained in their application packages for advertising and promotional purposes for the Elkton FFA Alumni Scholarship Program without further compensation or notification. I understand that the information on this application is true and correct to the best of my knowledge as evidenced by these signatures. I understand that all information contained on this application is subject to verification by the Elkton FFA Alumni and that false information will lead to disqualification. **Scholarship will be for the 2nd semester/term of college and paid at that time; a first semester grade transcript will need to be submitted to the FFA Alumni.**

Applicant Signature (Required)

Date:

\_\_\_\_\_

Parent/Guardian Signature(s) (Required)

Date:

\_\_\_\_\_

Date:

\_\_\_\_\_

**Applications are due by May 2, 2013 to your FFA advisor.**

## VIII Advisor's Statement

How many years has the applicant been an FFA member? \_\_\_\_\_

In the space below, please provide a brief evaluation of the applicant's program participation and dedication as a student.

I hereby certify that the information submitted here is true and correct to the best of my knowledge.

\_\_\_\_\_  
Advisor's Printed Name

\_\_\_\_\_  
Advisor's Signature (Required)