

## SCHOLARSHIP APPLICATION DIRECTIONS UNITED WISCONSIN GRAIN PRODUCERS LLC

APPLICATIONS MUST BE POSTMARKED NO LATER THAN **MARCH 1, 2017**, THIS IS A FIRM DATE – THERE WILL BE NO EXCEPTIONS ON ANY MATERIAL RECEIVED AFTER THIS DATE!

Many applications are rejected because they are not complete. Due to the number of applications received, we are not able to take the time to send them back to you for completion. Please be sure that all forms are filled in completely before forwarding to us. **Incomplete applications will not be submitted to the Scholarship Committee for their consideration.** Please make sure your name is on all sheets and follow the instructions carefully. (*Suggestion: Collecting all the needed material for your application and sending it to us yourself will help guarantee a completed packet.*)

1. **Complete** the Application Form.
2. On a **separate** sheet of paper, include a **one-page summary** of some of the significant events of your life and describe your educational goals.
3. If you are a high school senior, college student, or continuing education student, please have your high school (or college, as applicable) guidance director, advisor or equivalent **give you or mail us a transcript of your grades to the address listed below.**

United Wisconsin Grain Producers LLC  
Attention: Scholarship Program  
P.O. Box 247  
Friesland, WI 53935

4. **THREE** references are required. Have your references mail the completed form to the address above, or have them return the reference back to you (*this would assure you of a completed application*). Reference Sheets may be given to a high school principal, teacher, banker and/or employers. At least one reference should be from an employer, church personnel or community leader. **Please inform the person completing your reference that it is very important for the mailing to be postmarked no later than March 1, 2017.**
5. In order to be eligible for the scholarship, you must begin your first semester of post-secondary education within one year of graduating from High School. **In order to participate you must be a United Wisconsin Grain Producer investor, customer/producer of UWGP, a son/daughter of a UWGP investor, OR a graduating senior/alumni student at a public or private high school in one of the following communities: Randolph, Cambria-Friesland, Fall River, Columbus, Poynette, Pardeeville, Portage, Beaver Dam, Waupun, Horicon, Juneau/Dodgeland, Montello, Green Lake, Princeton, Rio or Markesan.** To receive the scholarship, you must provide evidence of completion of a semester of post-secondary education, earning a grade-point average (GPA) of 2.0 or higher. You must also show proof of registration for the next semester at the post-secondary institution as a full-time or part-time student. The scholarship funds can be obtained by presenting the above information to your High School Administration Office.

Finalists may be asked to come in for an interview.

If you are awarded a scholarship, you will be asked to furnish two non-returnable photographs of yourself for publication.

**For Office Use Only**

Application Form _____	Reference _____
One Page Summary _____	Reference _____
Transcript _____	Reference _____

**UNITED WISCONSIN GRAIN PRODUCERS LLC  
SCHOLARSHIP APPLICATION**

Date: \_\_\_\_\_ Current Status: High School ( ) College ( ) Non-traditional ( )

1. Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2. Home Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Zip)

3. Father's Name (or Guardian): \_\_\_\_\_ Occupation: \_\_\_\_\_

4. Mother's Name (or Guardian): \_\_\_\_\_ Occupation: \_\_\_\_\_

5. Number of children in your family: \_\_\_\_\_ Number in post high school education: \_\_\_\_\_

6. What are your career plans? \_\_\_\_\_

What 2 year or 4 year degree will you be pursuing? \_\_\_\_\_

7. Name of college you are attending or the school you will attend next year? \_\_\_\_\_

8. A. What is the total cost per year at your chosen school for tuition, books, food, lodging and transportation? \_\_\_\_\_

B. Approximate the amount you can use from your savings, any money you earn, and what your parents can contribute realistically: \_\_\_\_\_

C. A-B=Your financial need: \_\_\_\_\_

D. Other financial aid: \_\_\_\_\_

9. High School Attended: \_\_\_\_\_ Year Graduated: \_\_\_\_\_

Class Rank: \_\_\_\_\_ Number in Graduating Class: \_\_\_\_\_

Test Scores: SAT \_\_\_\_\_ ACT \_\_\_\_\_ PSAT \_\_\_\_\_

10. List your high school/college clubs and activities, including offices held: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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11. List youth organizations or community activities you have participated in, including offices held:\_\_\_\_\_
12. List church activities (optional):\_\_\_\_\_
13. List any work experiences you have had during high school and/or college:\_\_\_\_\_
14. Add any information you think is pertinent to this application:\_\_\_\_\_
15. Are your parents stockholders or employees of UWGP?\_\_\_\_\_
16. Give the names and addresses of **three** references you will be sending a Scholarship Application Reference Form to:
- 1.)\_\_\_\_\_
- 2.)\_\_\_\_\_
- 3.)\_\_\_\_\_
17. Please read and sign the following statement:
- I give my permission to release this application and a transcript of my school records to any appropriately designated local scholarship committee member.
- Signature:\_\_\_\_\_
- Parent's Signature (if application is a minor):\_\_\_\_\_
18. Phone number where you can be reached:\_\_\_\_\_

**UNITED WISCONSIN GRAIN PRODUCERS LLC  
SCHOLARSHIP APPLICATION REFERENCE**

Name of Applicant: \_\_\_\_\_

The above named applicant has given your name to us as a reference in evaluating his/her scholarship application. Based on your experience(s) with the applicant, we would appreciate any insight you may be able to provide.

**Please be specific and concise as possible.** You need not list the applicant's activities, grades, or future plans; those are reported in the application form. All information will be held in the strictest confidence.

	<b>Below Average</b>	<b>Average</b>	<b>Above Average</b>	<b>Excellent</b>	<b>Outstanding</b>
<b>Scholastic</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Leadership</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Adaptability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Initiative</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Reliability</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Integrity</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Self-discipline</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Attendance</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How do you know the applicant? If you were a teacher or a coach, give the subject; if employer, the company. Please include length of time you have known the applicant and any additional comments.

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

Print or Type Your Name: \_\_\_\_\_

Place of Employment and Position Held: \_\_\_\_\_

Business Telephone Number: \_\_\_\_\_

Send to UWGP, Attention: Scholarship Program, P.O. Box 247, Friesland, WI, 53935 <b>no later than March 1, 2017. If your reference is not postmarked by that date, the student's application will not be considered.</b>
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