



## Agricultural Scholarship Application

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

County of Residence: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Father's Occupation (Please be specific): \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Mother's Occupation (Please be specific): \_\_\_\_\_

Sibling Name:	Age:	School (if attending) :
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Class Rank (Please attach transcript of grades) : \_\_\_\_\_

College, Technical School or other Post-High School Program planning to attend:

Major/Area of Study: \_\_\_\_\_

Application must be received no later than March 1, 2018 to be eligible.

Please return to: Lindsay Sankey, P.O. Box 516, Richmond, IN 47375 or [scholarships@harvestlandcoop.com](mailto:scholarships@harvestlandcoop.com)  
Phone: 765.962.1527 | Fax: 765.962.3855

Work Experience - Please list any jobs that you hold or have held:  
(Employer, Position and Length of Employment)

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Other Scholarships or Grants you will be receiving:

Name:	Amount:
<hr/>	\$ <hr/>
<hr/>	\$ <hr/>
<hr/>	\$ <hr/>

Please provide information about your local newspaper:

Name: 

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 City: 

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 Phone: 

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- On the attached sheet of paper, list extracurricular/leadership activities.
- On the attached sheet of paper, prepare a short statement regarding your future career plans **in an agricultural related field.**

I understand that I am voluntarily releasing the above information to Harvest Land Co-op, Inc. for the purpose of applying for a scholarship for the upcoming academic year for an agricultural related program. Harvest Land Co-op is authorized to review the information in this context.

*I also understand that if I am awarded a scholarship, it will be paid upon verification of successful completion of my first semester, quarter or term and enrollment in my second semester, quarter or term.*

Signed 

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 Date 

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## Extracurricular/Leadership Activities

Student's Name: \_\_\_\_\_

Please list pertinent extracurricular/leadership activities, providing a brief explanation if necessary.  
(Additional sheets may be used.)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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## Future Career Goals

Student's Name: \_\_\_\_\_

Please prepare a short statement regarding your future career in an agricultural related field.  
(Please limit the statement to this page.)

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