



# **Pro-Health, LLC Scholarship Program**





## Pro-Health, LLC Scholarship Program

- **Deadline:** April 30, 2022
- **Number of Awards:** 2
- **Award Amount:** \$2,500
- **Website:** [Unknown](#)
- **Phone:** 214-370-6316
- **Fax:** Not Available
- **Email:** danet@pro-Health.net
- **Address:** 2210 Bush Dr. #200 McKinney, TX 75070

Pro-Health, LLC scholarship is dedicated to Dalhart High School Senior students who plan on pursuing majors in agriculture or plant and crop science at an accredited University or College. Students must maintain a minimum GPA of 3.00 throughout high school.

### Full Description

Pro Health was founded in 2005 and is a privately held produce and farming company. Our headquarters are located in McKinney, Texas. We also have packaging locations in Wray Colorado, Dalhart Texas, and Forest Park Georgia. We have farming operations in SW Nebraska and W Texas.

We specialize in potatoes. We are a fully integrated company. This allows us to control all aspects of our product, including growing, storing, packaging, marketing and sales, as well as shipping.

We are committed to be good stewards of the land and the communities in which we operate and live.

We are committed to furthering education and innovation in the agricultural field.

Pro-Health, LLC offers a scholarship dedicated to Dalhart High School Seniors who plan on majoring in agriculture, plant and crop science or other related fields of study at an accredited University and College.

The deadline for submitting the application forms is April 30, 2022.



## Who's eligible?

- The candidates must be Dalhart, TX residents at the time of the application process.
- Candidates must be enrolled as a Senior at Dalhart High School
- They must maintain a GPA of 3.00 throughout High School
- They should plan on a major in agriculture or plant and crop science at an accredited University or College
- They must commit to full-time student enrollment (4-8 semester units) at an accredited University or College

## How to Apply

The applications must be submitted via mail no later than February 10, 2021 and include the following additional information/documents:

- Name of the applicant
- Name, address and contact details of his/her school, college, or university
- The applicant's current official grades transcript (no photocopies or scanned copies are accepted)
- Two recommendation letters from a Teacher, Coach, Counselor, or Principal and a former/present employer
- The applicant's essay (500 maximum words)
  - **Essay Topic #1:** Discuss an accomplishment, event, or realization that sparked a period of personal growth and a new understanding of yourself or others.
  - or**
  - **Essay Topic #2:** Why did you choose agriculture as a career? How do you think you can help the agriculture field? What field of agriculture will you like to concentrate in? Why?
- Mail documents to:  
ATTN: Danet Cartagena Felix / Heather Larsen  
Pro-Health, LLC  
2210 Bush Dr. #200  
McKinney, TX 75070



## Pro-Health, LLC Scholarship Program

### *Applicant Information*

Date	
Student Name	
Student Contact Phone # Or Parent Contact Phone #	
Student Email (Preferably personal)	
Parent Names	
Parent Email	
Years at Dalhart High School	

Planned Major	
Name of College or University	
University Freshmen Year	

**\*\*\* Scholarship checks will be mailed in early-August to the college or university.**



## Pro-Health, LLC Scholarship Program Application Form

Please <b>type</b> your answers. <i>Use a additional piece of paper if necessary</i>		
1.	Last Name:	First Name, Middle Initial:
2.	Mailing Address Street: City: _____ State: _____ Zip: _____	
3.	Daytime telephone number: (      )  Email address: _____	
4.	Date of birth:    Month                  Day                  Year	
5.	Cumulative Grade Point Average (GPA): _____ (On a 4.0 scale)	
6.	Name and location of high school: <b><i>Dalhart High School</i></b>	
7.	A. List any academic honors, awards and membership activities while in high school: _____ _____ _____ _____  B. List your hobbies, outside interests, extracurricular activities and school related volunteer activities: _____ _____ _____  C. List your non-school sponsored volunteer activities in the community: _____ _____ _____ _____	
8.	A. If you have decided on the college you will attend, please list the school name:  • B. If not, list your top three (3) college choices: 1. 2. 3.	
9.	Anticipated field of study:	



Date

University Name

Scholarship Office or Financial Aid Office

Mailing Address

City, State, Zip code

Re: Student Name & Student number

To whom it may concern,

Enclosed please find a check in the amount of \$ (Insert amount) to be applied to the student account of Student Name, Student ID#.

Student Name is the recipient of a scholarship from **Pro-Health, LLC**. This check represents the amount awarded to Student Name by Pro-Health, LLC. Please apply this check to his tuition account balance.

Please send an email to [danet@pro-health.net](mailto:danet@pro-health.net) confirming the receipt and proper allocation of these funds to the Student Name account.

Sincerely.

Brandon Larsen  
President/Owner  
Pro-Health, LLC