RIDGE YOUTH AGRICULTURE FOUNDATION, INC.

SCHOLARSHIP

# GENERAL INFORMATION

FOR ALL APPLICANTS

1. Ridge Youth Agriculture Foundation, Inc. scholarships are granted annually to qualified agriculture students who have demonstrated an interest in the broad field of agriculture and who wish to pursue a course of study, directly or indirectly related to that field. Agriculture major is defined as a program of related courses, successful completion of which, along with other requirements, is recognized by award of the appropriate degree. A major includes courses required by the department level prerequisites to the courses so required. Veterinary Medicine, Agricultural Economics, Agricultural Chemistry, etc. are acceptable majors. (See attached list.)
2. The student shall maintain a 2.5 GPA in high school general core classes as well as the agriculture program and submit proof of such at time of application.
3. The student must divulge the needed information to have the scholarship monies deposited into their student account at the college of their choice and must enroll prior to December 31st of the award year.
4. Awards are currently made in the amounts of $1,000\*, $500\*, and $250\*.

*\*The amount awarded shall depend upon the availability of funds as determined by the Scholarship Committee*.

1. Application forms must be received on or before **April 15th**.

The completed application packet shall consist of the following:

1. **Completed RYAF Scholarship Application Form.**
2. **A written statement by the applicant listing plans and ambitions and what led to their interest in agriculture (250-300 words).**
3. Activity Record and References form
4. Recommendation Statement
5. Applicant number will be used for identification.
6. Winner will be notified prior to graduation.

THE ABOVE INFORMATION MUST BE RECEIVED NO LATER THAN **APRIL 15TH**

If you have any questions, feel free to call us at (863) 412-6470.

RYAF SCHOLARSHIP

##### APPLICATION FORM

APPLICANT #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| SOCIAL SECURITY #: | | | | | | |  | | | | | | | | | | | | **APPLICATION DEADLINE: APRIL 15th** | | | | | | | | | | |
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| APPLICANT NAME: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Last First Middle Initial | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ADDRESS: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Street or P.O. Box City State Zip Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| PHONE NUMBER: | | | | ( ) | | | | | | | | | | | | | DATE OF BIRTH: | | | | | | | | |  | | | |
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| APPLICANT'S PROPOSED MAJOR: | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |
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| COLLEGE to which scholarship payments should be sent: Give complete name, address, city and zip code. Use full names - **DO NOT ABBREVIATE.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Name of College | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Street or P.O. Box/Room # City State Zip Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 2-year |  | | 4-year | | |  | | | Have you applied for admission? | | | | | | | | | Yes | |  | | | No | | | |  |
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| PARENT(S) OR GUARDIAN(S): | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| MOTHER’S OCCUPATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FATHER’S OCCUPATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NUMBER IN FAMILY: | | | | | | |  | | | | | Brothers: | | |  | | Sisters: | | | |  | | | |
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| ARE ANY IN COLLEGE? | | | | | | | | No | |  | | | Yes |  | | If Yes, How Many? | | | | | | | |  | | | | |
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| Applicant’s Signature: | | | | |  | | | | | | | | | | | | | | | | |
| Date: | | | | |  | | | | | | | | | | | | | | | | |

RYAF SCHOLARSHIP

**ACTIVITIES AND REFERENCES**

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| **Put an X in column for year of participation. Indicate office or membership. Attach additional sheets if necessary.** |

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| **SCHOOL ACTIVITIES** | | | | | **COMMUNITY ACTIVITIES** | | | | |
|  | **9** | **10** | **11** | **12** |  | **9** | **10** | **11** | **12** |
| Organizations |  |  |  |  | Organizations |  |  |  |  |
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| Student Government |  |  |  |  | Employment (State Duration) |  |  |  |  |
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| Athletics |  |  |  |  | Awards, Honors & Other Achievements |  |  |  |  |
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| Awards, Honors & Other Achievements |  |  |  |  |  |  |  |  |  |
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| **REFERENCES:** | | | | | | | | | |
| Name, address and phone number of three (3) adults, other than your parents who can attest to your interest in your chosen field. | | | | | | | | | |
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RYAF SCHOLARSHIP

STUDENT STATEMENT

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RYAF SCHOLARSHIP

**RECOMMENDATION STATEMENT**

NAME OF APPLICANT:

APPLICANT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Why do you think this applicant has the ability to profit from college training?

In your opinion, does this student have a need for financial assistance?

What is your opinion of the applicant’s personal qualifications?

Based on high school performance, what are the applicant’s chances of success in the college of his choice?

Excellent Good Not Good

Other comments that might be helpful to the RYAF Scholarship Committee:

|  |  |  |
| --- | --- | --- |
| Signature of Person Making Recommendation |  | Date |
|  |  |  |
| Printed Name of Person Making Recommendation |  | Title |