

# Scholarship Application

## Marion/Clackamas Chapter of Oregon Women for Agriculture

**SCHOLARSHIP ELIGIBILITY:** The OWA Scholarship is made available to any person from Marion or Clackamas counties, preparing to enter or attending a college or university within the state of Oregon in an agricultural related major.

**A TRANSCRIPT** from each high school, junior college, and college attended, must accompany this application. Transcripts should be sealed by the registrar and accompany this application unopened. Three letters of recommendation must also be sent with the application.

Full Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Home Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ County \_\_\_\_\_

Telephone Number \_\_\_\_\_

Student Address \_\_\_\_\_  
 Phone Number \_\_\_\_\_

College/University \_\_\_\_\_

Applying to enter:                      Fall                      Winter                      Spring                      Summer

Major \_\_\_\_\_

Occupation you prepare for \_\_\_\_\_

Local Newspaper's name and address \_\_\_\_\_

### AGRICULTURAL BACKGROUND

Did you grow up on a farm?                      Yes                      No                      \_\_\_\_\_ Acres

Did you work on a farm?                      Yes                      No                      \_\_\_\_\_ Acres

**Write a brief description of your past agricultural experiences. (On additional page)**

**For the career in which you are preparing, what steps are necessary to attain that goal and how have you prepared and planned to complete this goal? (On additional page)**

List your involvement in community activities and service.

_____	_____
_____	_____
_____	_____
_____	_____

List your most significant leadership activities.

_____	_____
_____	_____
_____	_____
_____	_____

List awards/honors/recognition for school activities, citizenship, and scholarship.

_____	_____
_____	_____
_____	_____
_____	_____

List high schools, junior colleges, and universities attended, dates of attendance and graduation (including your present school).

_____	_____
_____	_____

Applicant's overall GPA from high school \_\_\_\_\_; Jr. College \_\_\_\_\_; University \_\_\_\_\_

Class Ranking \_\_\_\_\_ out of \_\_\_\_\_ (high school only)

This September's class standing:    Freshman                      Sophomore                      Junior                      Senior

How did you find out about this scholarship? \_\_\_\_\_

Are you receiving any other scholarship or award monies?    Yes                      No                      Unknown

Please list names and amounts \_\_\_\_\_

\_\_\_\_\_

Will you be working while attending college? \_\_\_\_\_

**LETTERS OF RECOMMENDATION**

You must submit three letters of recommendation giving information regarding the applicant's character, ability, and community service/involvement.

Write the names and occupations of the persons (relatives excluded) writing the letters.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Please list siblings, their ages (if under 21) and degree of dependency (entire, half, etc.)

\_\_\_\_\_

\_\_\_\_\_

Do you have brothers or sisters in college? \_\_\_\_\_ If yes, state age and year in college \_\_\_\_\_

Mother's Name and Address

Father's Name and Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will you be living on campus or at home? \_\_\_\_\_

**Please describe your work experience and list one work reference. (On additional page.)**

**How do you plan to be involved on campus and in the community in which you will be living?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IN YOUR OWN HANDWRITING**, please share with the committee why you chose the major and career path that you are following. (You can continue on an additional page.)

Applicant certifies that the above information is true. Applicant agrees that if applicant is selected for a scholarship, applicant will attend the institution listed above and will pursue the major course of study listed above for the duration of the academic year listed above. Applicant understands and agrees that failure to comply with the above may render applicant ineligible for the scholarship granted and applicant may be required to return any remaining unused portions of the scholarship award to the Oregon Women for Agriculture Marion/Clackamas Chapter. Upon completion of each portion of the academic year in question, applicant shall supply the OWA with a complete transcript.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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Applicant Signature