2022 Columbiana County Buckeye Dairy Booster Scholarship

**Purpose:** To provide one to two scholarships for Columbiana County Dairy Industry family members attending an institution of higher learning depending on the number of applications received. Scholarships are to be applied toward tuition, books, housing, etc.

**Scholarship Amount:** $1000.00

**Eligibility:** The applicant must be a member of a Columbiana County family whose primary occupation is directly involved in the Dairy Industry, including but not limited to Dairy Cattle Milk Production, Dairy Cattle Heifer Raising, and Dairy Equipment/Supplies/Supplement Sales (providing Dairy is the primary focus of Sales). Student must prove enrollment, or submit a letter of admission, to a two or four year institution of higher learning or graduate school. Those applying are not required to limit their educational choice to an agricultural related field. Student must be considered a full-time student. Applicant must maintain at least a B or 3.0 grade point average. Previous scholarship receiptants may not reapply.

**Application Process:** Notices of the scholarship will be sent to all Columbiana County High Schools, placed in the Columbiana County Buckeye Dairy Booster newsletter, and all local newspapers. Scholarship forms may be obtained from:

Columbiana County Buckeye Dairy Boosters
C/O Pam Herron
3836 Woodsdale Rd.
Salem, Ohio 44460
Phone: 330-222-1637
Email jayherron@frontier.com

The student must return a **completed application, letter of admission and include two (2) letters of reference.** Also each application must include an **official high school or college transcript** for the applicant.

**Application Due Date:** All applications must be postmarked by Saturday March 12, 2022. Any application not fulfilling these requirements will not be considered for the award.

**Judging:** The decision of a committee of judges appointed by the Columbiana County Buckeye Dairy Boosters will be final. The committee will judge the applications by number only. No names will be made available to the judges. The award will be made on a non-discriminatory basis without regard to race, color, national origin, sex, age, handicap, or religious affiliation.

**Award:** The award will be made public following notification of the winner.
Columbiana County Buckeye Dairy Boosters Scholarship Application

College Standing Fall Quarter:

___ Freshman  ___ Sophomore  ___ Junior  ___ Senior
___ Graduate School  (  ) year

Please Print:

Name ________________________________________________________________

Home Address ________________________________________________________

Telephone ____________  Cell ____________

Name of Parents or Legal Guardians or Spouse _____________________________

High School __________________________________________________________

College/University/Graduate School ______________________________________

City, State _________________________________

Field in which you are majoring or plan of major _________________________

Anticipated College/University/Graduate School graduation date _________

Work experience (including agricultural and non-agricultural), use back of application if necessary.
Experience ____________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Personal references (attach letters)
Name ________________  Name ________________

Address ________________  Address ________________

__________________________  ________________________

Phone ________________  Phone ________________

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List community and school organizations, activities, and honors.

Please answer the following in 100 words or less:

What do you think you can contribute to the future of your community and how has your experience of being a member of a dairy industry family prepared you for this?

Personal statement: Use the space to provide any additional information you feel would assist the committee in determining your qualifications.

I hereby acknowledge that the information submitted on this form is true and correct.

Signature  Date