



# SHAWANO COUNTY FARM PROGRESS DAYS SCHOLARSHIP APPLICATION:

## FRESHMAN



To be considered, this application must be completed in full. Please type or print in ink.  
Include two letters of reference and a copy of your most recent transcript of grades.  
Applications must be received in the UW-Extension office **by the close of business on March 1.**  
Announcement of the scholarship recipients will be made by April 15<sup>th</sup>.

Applicant must be a resident of Shawano County, enrolled in an agricultural related degreed program, short course, or continuing education program within the University of Wisconsin (2 or 4 year).

Name of Applicant: \_\_\_\_\_ Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_

Full name of both parents/guardians: \_\_\_\_\_

Parent's Address: \_\_\_\_\_  
\_\_\_\_\_

High School Name & Address: \_\_\_\_\_

Class Rank: \_\_\_\_\_ of \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

**Career Goals:** Briefly describe your plans for the future including education and career goals. Share some of the experiences that have encouraged you to enter into an agricultural field.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide the following narrative information in not more than 3 type written pages:

1. Indicate special recognition you have received for academic work (such as awards, honors, scholarships, etc) as well as significant activities in high school.
2. Indicate officer and leadership positions held in all organization, including church, school, FFA, 4-H, etc. Include Name of organization, year, office, duties.
3. Describe your involvement in community service, past and/or present.
4. Describe your work experiences and national, state, or community activities which might relate to your academic major, minor (s), or your college goals.
5. If you could change any aspect of the agricultural industry, what would it be and why?

Please provide the following financial data with respect to the school for which scholarship aid is sought. Amounts indicated should be for the entire academic year.

**Projected Expenses** (for entire upcoming school year):

Tuition	\$ _____	Room & Board	\$ _____
Books	\$ _____	Transportation	\$ _____
Special Fees	\$ _____	Other	\$ _____

**Total Expenses** \_\_\_\_\_

Additional notes for financial need (other family members currently in higher education, medical costs within the family, loss of job for student/parent, etc): \_\_\_\_\_

*The Shawano County Farm Progress Days Scholarship committee reserves the right to request additional information or documentation from the applicant in order to verify their financial need, academic record, and other relevant facts. A personal interview may be requested of the applicant.*

*I believe the information I have provided to be true to the best of my knowledge.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Parent or Guardian  
*(if applicant is under the age of 18)*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Completed application, two letters of references, and a copy of most recent transcript of grades must be received in the Shawano County UW-Extension office by the close of business on March 1st to qualify for consideration. Mail, Fax, or hand-deliver to:

311 N. Main St, Rm 109  
Shawano, WI 54166  
Phone: 715-526-6136  
FAX: 715-526-4875

E-Mail: [terri.brunner@shawanocountywi.us](mailto:terri.brunner@shawanocountywi.us)



**UW-Madison Extension**  
SHAWANO COUNTY