



Scholarship Application Checklist

Please double-check that you have fully complete the application and included all necessary supporting documents before submitting. **Incomplete applications will not be accepted.**

- Complete and Signed Application
- Current Semester Transcript
- Two Letters of Recommendation (*one must be from an employer or agricultural advisor*)
- Personal Statement - Biography
- Personal Statement - Agricultural Experiences

Complete forms can be submitted electronically or by mail. Must be **received by April 15.**

Email complete application packets to: office@marioncofarm.com

Mail complete application packets to: Marion County Farm Bureau
Attn: Scholarship Committee
PO Box 12216
Salem, OR 97309

Contact us at office@marioncofarm.com with any questions.



Marion County Farm Bureau
PO Box 12216 ▪ Salem, OR 97309

Phone: 503.877.1999 ▪ Fax: 866.509.3212
info@marioncofarm.com ▪ www.marioncofarm.com

Marion County Farm Bureau Memorial Scholarships

General Information

1. Scholarship applications will be judged by a panel of Marion County Farm Bureau members.
2. Applications will be judged on accuracy, neatness and organization, financial need, agricultural experience, and GPA.
3. Scholarships ranging up to \$2500 may be awarded.
4. Award recipients will also receive a one-year supporting membership to the Marion County Farm Bureau.
5. Completed forms can be submitted via electronically or USPS and **must be received by April 15, 2024.**

Mary Petzel Memorial Scholarship

Eligibility

1. Applicant must be an immediate family member (*parent, sibling, or grandparent*) of a voting or supporting member of the Marion County Farm Bureau, **OR** enrolled in 4H or FFA, **OR** majoring in Agriculture.
2. The applicant must be a graduating high school senior or a full-time freshman, sophomore, junior, or senior (*continuing to a graduate level degree program*) at an accredited college or trade school.

Scott Miller Memorial Scholarship

Eligibility

1. Applicant must be an immediate family member (*parent, sibling, or grandparent*) of a voting or supporting member of the Marion County Farm Bureau.
2. The applicant must be a graduating high school senior or a full-time freshman, sophomore, junior, or senior (*continuing to a graduate level degree program*) at an accredited college or trade school.
3. Applicant must be from Marion County.

Roger DeJager Memorial Scholarship

Eligibility

1. Applicant must be an immediate family member (*parent, sibling, or grandparent*) of a voting or supporting member of the Marion County Farm Bureau.
2. The applicant must be a graduating high school senior or a full-time freshman, sophomore, junior, or senior (*continuing to a graduate level degree program*) at an accredited college or trade school.
3. Applicant must be from Marion County.
4. Preference will be given to students pursuing a degree in Dairy Husbandry & Production, Large Animal Veterinary Sciences, or similar Ag related fields of study.

Instructions

1. Complete pages 2-3 of this **application.**
2. Provide a current semester high school and/or college (if applicable) **transcript.**
3. Provide **two letters** of recommendation. One must be from an employer or agricultural advisor.
4. Write **two separate** personal statements. Limit each to **one single spaced page.**
 - a. Please write **your biography.** Include reasons for your choice of major subject and what your plans are for the future.
 - b. Please write a description about **your agricultural experiences,** if any. This may include past work experiences.
5. Completed forms can be submitted via electronically or USPS and must be **received by April 15, 2024.**
 - a. If emailing, please send to: **office@marioncofarm.com**
 - b. If sending via USPS, please mail to: **Marion County Farm Bureau
Attn: Scholarship Committee
PO Box 12216
Salem, OR 97309**

Marion County Farm Bureau Memorial Scholarships 2024 APPLICATION

I am applying for the: Mary Petzel Memorial Scholarship
 (check all that apply) Scott Miller Memorial Scholarship
 Roger DeJager Memorial Scholarship

General Information PLEASE PRINT

Name: _____
First Last

Mailing Address: _____
Street

City State Zip County

Phone: _____ Date of Birth: _____

Email: _____

Parents Name: _____
Father Mother

Name of Marion County Farm Bureau Member you are related to: *(if applicable)* _____
 Relation: SELF PARENT
 SIBLING GRANDPARENT
 Member Name & Membership Number _____

4H or FFA Chapter: *(if applicable)* _____

Advisor: _____
Name Phone Number

Did you grow up on a farm? YES NO

Have you worked on a farm? YES NO

Future Scholastic Information/Intentions

College/University: *(if decided)* _____

Applying to enter: Fall Winter Spring Summer

What will your college standing be this coming September?
 Freshman Sophomore Junior Senior Graduate

Major(s): _____

Minor(s): *(if applicable)* _____

Occupation you are preparing for: _____

Community Involvement History ATTACH ADDITIONAL SHEET IF NECESSARY

List your involvement in community activities and service:

List your most significant leadership activities:

List school activities and scholastic awards/honors/recognition:

Financial Information

Have you been or are you currently the beneficiary of a scholarship or other awards? If so, please list names and amounts.

Have you received a Marion County Farm Bureau memorial scholarship in the past? If so, please indicate name and year.

Will you work while attending college?

Applicant certifies that the above information is true. Applicant agrees that if they are selected for a scholarship, they 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 portions of the scholarship award to Marion County Farm Bureau's Scholarship Selection Committee. Upon completion of each portion of the academic year in question, applicant shall supply the Scholarship Selection Committee with a complete transcript.

Applicant's Signature

Date