



FARMERS KEEP
OUR COUNTY
GREEN

MONMOUTH COUNTY BOARD OF AGRICULTURE
20 COURT STREET, FREEHOLD, NEW JERSEY 07728

MONMOUTH COUNTY BOARD OF AGRICULTURE SCHOLARSHIP FUND

Committee Recommendations:

1. That a Scholarship Committee be set up, consisting of the County Board President, Vice President and the 4-H Agent, to make recipient recommendations to the County Board.
2. That scholarship be in the form of grants to college students studying agricultural and veterinarian related courses.
3. That the maximum grant to any one student in any one year not exceed \$ 500.00.
4. That the County Board make an initial contribution to the fund to bring the principal balance to \$ 500.00.
5. That the County Board contribute to the Scholarship Fund each year so that the principal balance does not go below \$ 5000.00, taking into account earned interest.
6. That the Scholarship Committee consider the applicant's academic record as well as his or her financial need in their consideration.
7. That the Scholarship Award be available to Monmouth County residents only.
8. Application must be submitted by May 10 in the year preceding the granting of the award.
9. High School and College transcripts must be submitted.
10. Applicants will be awarded by July 1.

MONMOUTH COUNTY BOARD OF AGRICULTURE SCHOLARSHIP FUND

DEADLINE - May 10, _____

PLEASE READ CAREFULLY & COMPLETE ALL REQUIREMENTS

ALL CORRESPONDENCE TO:
President, Board of Agriculture
RCE of Monmouth County
4000 Kozloski Road
P.O. Box 5033
Freehold, NJ 07728-5033

DATE: _____

NAME: _____
(Last) (First) (Middle)

PRESENT ADDRESS: _____
(Street)

(City) (State) (Zip Code)

TELEPHONE NUMBER WHERE YOU CAN BE REACHED: DAY () NIGHT ()

YOUR COUNTY RESIDENCY IS: _____

NAME OF PARENT OR GUARDIAN: _____

PARENT OR GUARDIAN ADDRESS: _____
(Street)

(City) (State) (Zip Code)

PARENT OR GUARDIAN OCCUPATION: _____

YOUR DATE OF BIRTH: _____

YOUR PLACE OF BIRTH: _____

MARRIED: YES _____ NO _____ NUMBER OF CHILDREN IF MARRIED: _____

STATE OF HEALTH: _____

COLLEGE or UNIVERSITY AT WHICH YOU ARE NOW STUDYING: _____

ARE YOU A FULL TIME or PART TIME STUDENT: _____

WHAT YEAR ARE YOU IN COLLEGE (present time)? _____

WHAT IS YOUR MAJOR COURSE OF STUDY _____

NAME OF COLLEGE ADVISOR: _____

(Address)

(Phone Number)

PLEASE SUBMIT PROOF OF ENROLLMENT AND A COPY OF YOUR HIGH SCHOOL OR COLLEGE TRANSCRIPT.

SUBMIT YOUR APPLICATION IN DUPLICATE

18. FINANCIAL STATUS: ROUND OFF TO THE NEAREST HUNDRED.

PRESENT TUITION COSTS _____

PRESENT HOUSING and BOARD COSTS _____

OTHER EXPENSES (explain briefly) _____

TOTAL: _____

19. WHAT PERCENTAGE DO THE FOLLOWING ITEMS CONTRIBUTE TO YOUR EDUCATIONAL EXPENSES:

PARENTS, RELATIVES and FRIENDS _____

LOANS _____

SCHOLARSHIPS - (awards or grants) _____

WORK STUDY _____

SUMMER and CURRENT EMPLOYMENT _____

TOTAL: _____

20. EXPERIENCE IN FIELD OF AGRICULTURE: _____

21. WHAT ORGANIZATIONS OR CLUBS DO YOU BELONG TO: _____

22. WHAT AWARDS OR SCHOLARSHIPS HAVE YOU RECEIVED: _____

Use Blank sides of Application if needed.