**$500 CWA Memorial Scholarship**

**Deadline: April 15, 2024**

# CALIFORNIA WOMEN FOR AGRICULTURE

**San Joaquin Chapter**

MEMORIAL SCHOLARSHIP: $500 scholarship for graduating high school seniors, whose parent, grandparent, or aunt or uncle and has been a current member of San Joaquin Chapter of CWA for the past 2 years. Funds will be paid directly to recipients. MONEY WILL BE DISBURSED BY CWA, DIRECTLY TO STUDENT, UPON RECEIVING PROOF OF REGISTRATION AS A FULL-TIME STUDENT AT A STATE COLLEGE OR UNIVERSITY. STUDENTS WILL BE NOTIFIED BY JUNE 1 OF SCHOLARSHIP AWARD.

The ideal applicant will have participated in FFA, 4-H or Grange activities during

the high school years. He/She will be a goal-oriented student that demonstrates the ability to balance an academic schedule, extra-curricular activities, and work ethic with a plan for an ag major and/or career in the agricultural industry.

* Must be a child or grandchild of a current member of San Joaquin Chapter California Women for Agriculture
* Male or Female – Must be a US citizen and a resident of California
* Must be a full time student (12 units)
* Any Major

INSTRUCTIONS: (Print Legibly)

1. **Completed application** should be filled out in its entirety, and submitted on the following application form**. Activities Record, Letters of Recommendation, Essay, and transcripts must be included with this application.**
2. **Activities Record (or Resume with all the same information)**
3. **Two letters of recommendation:**
4. reference from FFA/Ag teacher, 4-H or Grange leader
5. personal reference from a non-family member
6. **Write a short (no more than 500 words) essay about yourself. Include:**

a) how agriculture has benefited you

1. plans for schooling and career
2. any information about high school, FFA, 4-H or Grange activities which

you feel is particularly relevant to this scholarship or your future plans.

1. **Transcripts (official High School transcripts)**

APPLICATION DEADLINE: APPLICATION MUST BE POSTMARKED BY **APRIL 15**

MAIL COMPLETED APPLICATIONS TO: SCHOLARSHIP COMMITTEE

 CWA – SAN JOAQUIN CHAPTER

 15370 MURPHY RD.

 ESCALON, CA 95320

KEEP THIS PAGE OF INFORMATION FOR LATER REFERENCE.

CWA - $500 Memorial Scholarship

Cover Page for Application

**California Women for Agriculture, San Joaquin Chapter Application**

San Joaquin Chapter CWA Members Name and Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 LAST FIRST MIDDLE

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 STREET CITY STATE ZIP

DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COLLEGE YOU PLAN TO ATTEND: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLANNED MAJOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CAREER GOAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FAMILY HISTORY

FATHER’S NAME OCCUPATION

MOTHER’S NAME OCCUPATION

CHILDREN IN FAMILY (AGE AND YEAR IN SCHOOL)

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_release liability for use of my photo, to be used by San Joaquin California Women for Agriculture for use in newsletter and other publication associated with SanJoaquin California Women for Agriculture.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature date

**HIGH SCHOOL VERIFICATION: GPA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

ATTACH TRANSCRIPT WITH SAT scores (if taken not mandatory)

## ATTACH ALL SUPPORTING DOCUMENTS TO THIS APPLICATION

# APPLICATIONS MUST BE POSTMARKED BY APRIL 15

For your own protection send certified mail.

**Incomplete applications will not be considered.**

Activities Record

Mark “X” in grade Column to show year of participation. Indicate any office held.

(or attach your own summary or resume)

NAME(Last, First): DATE:

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| --- | --- | --- | --- | --- |
| **SCHOOL ACTIVITIES** | **9** | **10** | **11** | **12** |
| Student Government |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Organizations |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Athletics |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
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| Yell, Song, Pep Squad, Majorette, Etc. |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Awards, Honors, Significant Summer Exerpiences, Etc. |  |  |  |  |
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|  |  |  |  |  |
| **COMMUNITY ACTIVITIES** | **9** | **10** | **11** | **12** |
| Organizations and Volunteer Work |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Church Activities |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Employment |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Awards, Honors, Other Achievements |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Hobbies |  |  |  |  |
|  |  |  |  |  |
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| Comments: |  |  |  |  |