



765 MAIN STREET
HALF MOON BAY
CALIFORNIA 94019
(650) 726-4485

Scholarship Application

Deadline: Friday, March 14, 2025

Instructions and information for Applicants. This sheet is designed to be helpful to students in the processing of an application for scholarship of the San Mateo County Farm Bureau.

Read carefully before filling out the application blank.

DIRECTIONS FOR FILLING OUT THE APPLICATION BLANK

1. Please read through the application carefully to understand the information needed to complete the form.
2. Use black ink when filling out the application or fill out application online at: <http://www.sanmateofarmbureau.org/programs/>
3. Answer all questions. If a particular item does not apply to you, write in N/A.
4. Re-read the parts you filled out and check for accuracy, completeness, and neatness.
5. Each applicant is required to ***submit a photograph with this application*** which may be used for publicity purposes should you receive an award.
6. Mail completed application to: San Mateo County Farm Bureau, 765 Main Street, Half Moon Bay, CA 94019.
7. **All applications must be** completed and **received** at the above address by **Friday, March 14, 2025** in order to be eligible for consideration.

ELIGIBILITY

1. Be a San Mateo County Farm Bureau member, dependent or collegiate (youth) member.
2. Be currently attending college or graduating high school senior who will be attending college the following year and majoring in an agriculture-related subject.

IMPORTANT: THESE DOCUMENTS MUST ACCOMPANY THIS APPLIATION

1. Two letters of recommendation:
 - a. Someone connect with your college or high school who will evaluate you as a student.
 - b. Someone in your community who will evaluate you as a citizen.
2. Sealed transcript of grades from the registrar of your high school and college or university if applicable.

and brief description of duties: _____

17. Do you expect to work during the coming summer vacation? ____ If so, supply information as to such expected employment: _____

18. If married, is your spouse employed? _____ If so, annual earnings: _____

19. Please state below your annual anticipated income and expenses for coming school year. Be specific on all items. Additional data may be attached.

EXPENSES

Tuition/Fees _____

Room & Board _____

Books & Supplies _____

Social (Frat., Sor., etc.) _____

Personal Debt Payments (Specify)

Transportation (Car Payment, Insurance)

Misc. Expenses (Specify) _____

INCOME

Earnings: Summer _____

Between Quarters _____

During School Year _____

Total Earnings _____

Husband's or Wife's Earnings _____

Aid from Family _____

G.I. Bill _____

Loans (Specify) _____

Scholarships (By Name and Amount)

Aid from Other Sources (Specify)

20. Please state below (or attached) in letter form why you are applying for this scholarship. Cover both financial need and academic promise.

Date: _____

Signature: _____

ALL INFORMATION WILL BE KEPT CONFIDENTIAL