



2024 Linda L. Lester Scholarship Program



Agricultural Scholarship Contact Information Form

The Linda L. Lester Scholarship is a program of the Santa Clara County Farm Bureau, in cooperation with American AgCredit. \$22,000 worth of scholarships will be awarded to 2024 recipients. The scholarships are for local high school seniors and college students who have a cumulative GPA of 3.00 or better and plan to major in agriculture, such as agricultural business, forestry, viticulture, animal science, crop science, environmental science, agricultural engineering, agricultural education, agricultural communications, food science, and others. Recipients of the scholarship will receive annual payments determined by their length of time remaining in college, up to four years. In order to receive annual payments, recipients must provide transcripts from the previous school year and enrollment verification for the upcoming school year. A GPA of 2.5 must be maintained throughout payment schedule.

Awards are based on scholastic achievement, career goals, leadership skills, community involvement, and accomplishments. **Applications must be written or typed and forms are available electronically here:**

http://www.santaclarafarmbureau.org/programs/?preview_id=11&preview_nonce=c8d86ef55d&preview=true. This form may be scanned or copied.

Applications must be complete and include the following:

- A. Scholarship Application**
- B. Sealed Official Transcripts**
- C. Personal Statement**
- D. Two Letters of Recommendation**
- E. High Resolution Photo**

To be considered for a scholarship, applications must be submitted in a timely manner and applicants must participate in an interview with the Santa Clara County Farm Bureau scholarship committee. Scholarship recipients will be notified by mail in June and monetary awards will be mailed directly to the recipient's college or university once school begins. Scholarship recipients will be asked to provide additional information for payment processing and are also requested to provide a senior class photo for use in future scholarship program promotion.

The Farm Bureau must receive your completed application at the address below* by:

FRIDAY, MARCH 29, 2024

***Please note: The office is not always staffed. It is best to mail your application packet or submit the application online.**

If you have any questions call Jess Brown at (831) 818-1193 or E-mail to: info@santaclarafarmbureau.org

APPLICATION FOR SCHOLARSHIP

1. Name: _____
Last First Middle

2. Home Address: _____ Telephone # _____

City, State, Zip: _____ email: _____

3. Mailing Address (if different from above): _____

City, State, Zip: _____ Telephone # _____

4. Date of Birth: _____ Place of Birth: _____

5. Sex: _____ Marital Status: _____ Spouses Name: _____

6. Name and Address of Parents: _____

7. Occupation of Parents/Spouse: _____

8. High School/College now attending: _____

9. List the colleges you have applied to if you are not presently attending:

10. List extracurricular high school/college activities: _____

11. List any academic honor or scholarships you received in high school/college: _____

12. For what business or profession are you preparing: _____

13. Do you have experience in the agricultural industry? _____ If yes, describe briefly: _____

14. Are you presently employed? _____ If so, give name and address of employer, hours worked per week

and brief description of duties: _____

15. Do you expect to work during the coming summer vacation? _____ If so, supply information as to such

expected employment: _____

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

17. Please state below you 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