2020 HOWARD WARMBOLD MEMORIAL HUBBARD, BELTRAMI & WADENA COUNTY FARMERS UNION SCHOLARSHIP GUIDELINES

ELIGIBILITY

1. Applicants must be completing their final term or have completed their final term of their senior year in high school or be a nontraditional student currently enrolled in a college program of study.
2. Applicants must have plans to attend or be currently enrolled in a post-secondary institution (technical or trade schools, community colleges, state universities or private institutions).
3. Applicant must be planning on, or already enrolled in an agriculture related field of study.
4. Applicant and/or applicant's family preferred to be a Minnesota Farmers Union member residing in Hubbard, Beltrami or Wadena County.

APPLICATIONS

1. Applicants must complete the Farmers Union Scholarship Application, Essay and have two letters of reference mailed to: Glen Schmidt, Minnesota Farmers Union Education Director, 305 Roselawn Ave, Suite 200, St. Paul, MN 55117 by the application deadline.
2. Application requests should be sent to the above address.
3. Applications must be completed by the person to whom the scholarship will be awarded.
4. Late applications will not be accepted. Applications must be postmarked Friday, March 20, 2020 at the latest.
5. Applications will not be returned to the applicant.
6. Minnesota Farmers Union reserves the right to print any portion of the winning applicant's scholarship essay in Minnesota Agriculture and in local papers.
7. Applicants must have one person (non-family members) write a letter of recommendation. The writer must mail his or her letter of recommendation to Glen Schmidt, Minnesota Farmers Union Education Director, 305 Roselawn Ave, Suite 200, St. Paul, MN 55117 before the application deadline.

SELECTION

1. A committee will review all eligible applications received by 5:00 p.m., March 20, 2020.
2. Priority will be given to those who have not received a scholarship in the past.
3. The committee will reach its decision by April 2020.
4. The Scholarship Committee will consist of the Minnesota Farmers Union President, The Minnesota Farmers Union Vice-President, and The Minnesota Farmers Union Education Director.

COMPENSATION

1. A $500 scholarship will be given to one Hubbard County Farmers Union student.
2. The winner of the scholarship will be notified in writing.
3. The scholarship committee reserves the right to not award a scholarship if applicants do not meet the specified criteria.
2020 HOWARD WARMBOLD MEMORIAL HUBBARD, BELTRAMI & WADENA COUNTY FARMERS UNION SCHOLARSHIP APPLICATION

Complete and send to the Minnesota Farmers Union, Attn: Glen Schmidt, Education Director, 305 Roselawn Ave, Suite 200, St. Paul, MN 55117 by March 20, 2020.

PERSONAL INFORMATION

Name: ______________________________________________________________________________________________________________________

Address: ______________________________________________________________________________________________________________________

Street  City  State  Zip

Phone: (_____________) ______________________ Date of Birth _____/_____/______

Email: ______________________________________________________________________________________________________________________

Parent or Guardian’s Name: ______________________________________________________________________________________________________

EDUCATION BACKGROUND

Name of High School: _____________________________________________________________________________________________________

Address: ______________________________________________________________________________________________________________________

Street  City  State  Zip

Phone Number: (______________) ______________________________________

Principal: ______________________________________________________________________________________________________________________

Date of High School Graduation: __________________________________________ Grade Point Average: _____________________

FUTURE PLANS

School that you plan to attend: __________________________________________________________________________________________

(If unsure list choices)

Address: ______________________________________________________________________________________________________________________

Street  City  State  Zip

Intended Major(s) and Minor(s)+ __________________________________________________________________________________________

Personal Address – if known: ______________________________________________________________________________________________________

Street  City  State  Zip

Date of the end of the 1st term: _____/_____/______
HIGH SCHOOL PARTICIPATION

Favorite Courses: ____________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

INTERESTS

Extra-Curricular (non-athletic) activities and number of years involved: ____________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Extra-curricular (athletic) activities and number of years involved: ________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Honors and Awards: _________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Hobbies, skills and interests: ________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Volunteer activities: _________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

(Updated 12/6/2019) HOWARD WARMBOULD MEMORIAL FARMERS UNION SCHOLARSHIP
EMPLOYMENT

Did you have a part-time paid job during high school: _____ Yes _____ No

Job(s), dates of employment and description of duties: ______________________________________________________________
______________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________

FARMERS UNION INVOLVEMENT

Are you or your family a current member of the Minnesota Farmers Union? _____ Yes _____ No

How many years has your family been members of Minnesota Farmers Union? ______________________________

Minnesota Farmers Union membership number ______________________________________________________________

Were you involved in any Minnesota Farmers Union youth activities? _____ Yes _____ No

If yes, please list:
______________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________
______________________________________________________________________________________________________________________________

REFERENCES

Please include the names, addresses and phone numbers of two (2) people whom you have chosen to write letters of recommendation for you. The reference should be from non-family members. The people writing the references must send their recommendations to the Minnesota Farmers Union, Attn: Education Department, 305 Roselawn Ave, Suite 200, St. Paul, MN 55117 by March 20, 2020.

1. ______________________________________________________________
   Name        City        State        Zip

2. ______________________________________________________________
   Name        City        State        Zip

The applicant is responsible for the validity of all of the information in this application. Please sign below to certify that all written is the truth to the best of your knowledge.

_______________________________________________________________________________________  _____________________
Signature       Date
SCHOLARSHIP ESSAY

Howard Warmbold was a lifetime member of Hubbard County Farmers Union and was an extremely active person in his community. On separate sheets of paper please write a double-spaced, typed essay (suggested length is about one page on each topic) describing the following:

a) how being involved in agriculture (a family farm) and/or Farmers Union had an affect on you, and
b) your involvement in your community.