2020 MINNESOTA FARMERS UNION
RICE COUNTY SCHOLARSHIP GUIDELINES
- RICE COUNTY RESIDENTS -

ELIGIBILITY

1. Applicants must be completing their final term or have completed their final term of their senior year in high school
2. Applicants must have plans to attend or are currently enrolled in a post-secondary institution (technical or trade schools, community colleges, state universities or private institutions).
3. The applicant’s family must be a Minnesota Farmers Union member residing in RICE COUNTY.

APPLICATIONS

1. Applicants must complete the Farmers Union Scholarship Application, Essay and have two letters of reference returned to the Education Director at Minnesota Farmers Union, Attn: Glen Schmidt, 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 youth to whom the scholarship will be awarded.
4. Late applications will not be accepted. Applications must be in the MFU office by 5:00 p.m., Friday, March 20, 2020.
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.
7. Applicants must have two people (non-family members) write letters of recommendation. The writer must mail his or her letter of recommendation to Minnesota Farmers Union, Attn: Education Department, 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 committee will consist of the President of Minnesota Farmers Union, the Education Director, and two Rice County Farmers Union members.

COMPENSATION

1. $300 scholarship(s) will be given to Minnesota Farmers Union students.
2. The winner of the scholarship will be notified in writing and may be featured in Minnesota Agriculture.
3. The scholarship will be paid in full to the applicant's institution upon the following:
   - The youth maintains a grade point average at or above a 2.5 in high school or their first semester of higher education.
   - The youth provides proof of the above to the Education Director.
4. If the scholarship winner is unable to maintain a grade point average at or above a 2.5, an alternative plan of compensation will be negotiated between the student and the Education Director.
MINNESOTA FARMERS UNION RICE COUNTY LOCAL 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)
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

On another sheet of paper answer the following question. The answer should be 400-500 words in length.

Please explain why you chose your course of study and how you will use your education upon graduation. In addition, please explain any impact from being raised in your community and being part of Minnesota Farmers Union that has influenced your decision making.