



MARILYN SPIKER/SHEILA MASSEY MEMORIAL SCHOLARSHIP APPLICATION FORM

This scholarship is sponsored by the Foundation for Agricultural Education and Development (FAED) in cooperation with Women Involved in Farm Economics (WIFE). The one-year scholarship is available to any woman who will begin first or second Year College, technical or specialized study in a field related to agriculture. Courses may include, but are not limited to: Agronomy, Agriculture Economics, Agriculture Engineering, Veterinary Medicine, and Extension Educator. The scholarship may be used at the school of the recipient's choice. Special consideration will be given to an applicant who is the daughter; grand-daughter, sister, or niece of a member of FAED and/or WIFE provided her qualifications equal or exceeds those of other applicants.

PLEASE TYPE INFORMATION

(Additional pages may be added if additional space is required.)

Name (First) (Middle) (Last)

Home Address (Street or P.O. Box) (City) (State) (Zip)

School Address (Street or P.O. Box) (City) (State) (Zip)

Home Phone# School Phone # E-mail Address

Name of Parent(s) or Guardian

Please circle the choices that most accurately fit your situation:

Applicants association to FAED: You Mother Grandmother Sister Aunt

Provide name of member, state and approximate dates of membership:

Applicants association to WIFE: You Mother Grandmother Sister Aunt

Provide name of member, state and approximate dates of membership:

EDUCATION

Table with 4 columns: School Name & Address, Date(s) Attended, Hours/Credits Degree Earned, Ag Courses

High School

College

Technical or Specialized Training

Marilyn Spiker/Sheila Massey Memorial Scholarship Form
(Additional page(s) may be added if needed)

High School GPA: _____ Placement Test Score (ACT, SAT): _____

Honors/Awards:

School Activities:

Community Activities:

Organizational Memberships:

State your personal goals:

Please write a short essay on what you predict for American agriculture in the future?

College, University or Accredited Ag courses for which this scholarship will be used:

Send scholarship funds to:

(Recipient's Name)

(Name and Address of University)

Check will be awarded after we receive proof of enrollment acceptance.

References:

Please provide two (2) letters of recommendation from individuals not related to you. Advise the individuals writing the letters to place their correspondence in a sealed envelope. Submit these along with your application.

I certify that the above application information is correct.

Signature of Applicant: _____

Date: _____

Please return this form to:

Winning applicant will be notified on or about May 1, 2018.

FAED and WIFE will appreciate hearing how this scholarship benefits you as you complete your education. Thank you!