



## Rhode Island Farm Bureau Federation, Inc. 2024 Scholarship Application Form

This full application form, typed, as a pdf or neatly written, must be submitted by **September 23<sup>st</sup>, 2024**.

**The applicant or the parent/guardian of the applicant must be a current RIFB member to be eligible for a RIFB scholarship.**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email Address: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents/Legal Guardian's Name and Address:

\_\_\_\_\_

\_\_\_\_\_

Rhode Island Farm Bureau Membership Number: \_\_\_\_\_

**Academic Information:** (Complete all statements that apply.)

High School: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Name and Address of College, University or Institute of Higher Learning you Currently Attend

Or Plan to Attend in the Fall: \_\_\_\_\_

\_\_\_\_\_

Year You Expect to Graduate: \_\_\_\_\_ Current Year in College: \_\_\_\_\_



1. Why did you choose the school you plan to attend?
2. What major do you plan to pursue and what are your reasons for choosing this plan of study?
3. Did 4H or FFA influence your decision? If so, how?
4. What are your career plans? (25 words or less)

**Experience with Community Service:**

Please list in chronological order your community service experiences. Include things that contributed to the welfare of other individuals or community (including 4-H and FFA) and indicate the size and scope of your project. (Use back or additional page if needed.)



Identify any citizenship/leadership experiences you have been involved with:

List any extracurricular activities in school/college (clubs, band, sports, etc.):

List any work experience you have had. (Include type of work, hours/week, dates of employment). If possible, please include a contact name and telephone number for one of your employers. At the Committee's discretion, they may choose to contact your employer for a character reference.

Please submit two letters of recommendation from non-family members with this application.

**Statement by Applicant and Parent/Guardian**

**Applicant:** I personally have prepared this report and certify that it accurately reflects my work.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent/Guardian:** We have reviewed this report and believe it to be correct.

\_\_\_\_\_  
Signature of Parent/Guardian if applicant is under the age of 18) Date: \_\_\_\_\_

Responses must be postmarked by September 21<sup>th</sup> if mailed to:

Rhode Island Farm Bureau  
16B Nooseneck Hill Road  
West Greenwich, Rhode Island 02817

Responses may also be hand-delivered to the office by September 23. Please call or email to be sure the office is open.

Scholarships will be awarded at the Rhode Island Farm Bureau Annual Meeting  
on November 7, 2024

Thank you and good luck!