DEPARTMENT OF AGRICULTURE

SCHOLARSHIP ANNOUNCEMENT 20__
INFORMATION SHEET

Purpose
To assist students enrolled in a degree program in the Department of Agriculture. Several scholarships ($1,000 - $2,500 each) will be awarded to outstanding students.

Eligibility
Student must:
1. Be majoring in Agriculture.
2. Be a freshman, sophomore, junior (including transfer students) or senior enrolled at VSU.
3. Be in good standing with the University (3.0 GPA minimum).

Application Process
1. Applications are available electronically on http://www.vsu.edu/PDFFiles/Agriculture/Ag-Biz/Scholarship%20Application%20Form-2011.pdf, under the “Alphabetical Listing.” Please TYPE the application in Microsoft Word, sign and submit the application, along with all attachments to the Department of Agriculture (Owens Hall-103) by April 2nd at 4:00 P.M.

2. Each application should include the following information:
   - General DOA application form
   - Personal Statement discussing your background, academic accomplishments, career goals, and demonstrated financial need (one-page, double spaced, 12 pt. font).

   ****PLEASE PAPER CLIP RATHER THAN STAPLE YOUR MATERIALS****

Criteria
1. Academic excellence and outstanding potential as verified in the personal statement.

2. Financial need demonstrated in the application and personal statement.

3. Preference will be given to underrepresented groups or disadvantaged students.

Selection/Notification Process
1. A selection committee of VSU Department of Agriculture faculty will evaluate applications and select recipients.

2. Scholarships will be distributed in Fall 2012 after verification of enrollment and GPA.

If you have questions regarding this scholarship, please contact:
The Department Office, 103 Owens Hall, 804-524-5672 or Ms. Eldridge at jelridge@vsu.edu
# Scholarship Program Applications

## Contact Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
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<tbody>
<tr>
<td>Student ID Number:</td>
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<tr>
<td>Sex:</td>
<td>Male [ ] Female [ ]</td>
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<tr>
<td>First Name</td>
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<td>Last Name</td>
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<td>E-mail:</td>
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<td>Date of Birth:</td>
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## Academic Information

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<tr>
<td>Academic Standing:</td>
<td>Freshman [ ] Sophomore [ ] Junior [ ] Senior [ ] Graduate Student [ ]</td>
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<td>Major or Graduate Program:</td>
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<td>Minor:</td>
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<td>Number of Units Currently Enrolled:</td>
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<td>Number of Units Completed at VSU:</td>
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<td>Cumulative GPA:</td>
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<td>Expected Graduation Date:</td>
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## Financial Information

Please complete this section on your financial information.

Please indicate your living arrangement and state the amount you pay per month:

- [ ] With parent(s) $ [ ] House/Apartment - Shared $ [ ]
- [ ] Residence Hall $ [ ] House/Apartment – Alone $ [ ]
- [ ] Other: $ [ ]

What is your monthly income? $ [ ]

How many hours per week do you work? [ ]

What is the total monthly income of your household (include your income)? $ [ ]

What is your rent/house payment? $ [ ]

How many people live in your household? [ ]

Please note that late or incomplete applications will not be accepted.
DEPARTMENT OF AGRICULTURE
SCHOLARSHIP PROGRAMS
20__-20__ APPLICATION

Are you a U.S. citizen? (Select one):  ☐ Yes  ☐ No
Are you currently a Presidential Scholar? (Select one):  ☐ Yes  ☐ No
Are you currently a Provost Scholar? (Select one):  ☐ Yes  ☐ No
Are you currently a recipient of any other scholarship:  ☐ Yes  ☐ No
If so, please state the name and amount of award(s):

Please check to which scholarships you are applying (application form required for each scholarship to which you are applying):

☐ Altria Scholarship
☐ VA Farm Bureau Presidential Scholarship
☐ Agriculture Alumni Scholarship
☐ Dinwiddie Farm Bureau Scholarship
☐ Farm Credit of the Virginias Scholarship
☐ USDA-Multicultural Scholars Program
☐ Donald & Hazel Streb Scholarship
☐ J. R. Thomas Camp Scholarship
☐ Southern States Cooperatives Scholarship

I affirm the information provided above is true and accurate. I understand I may be disqualified if I provide false or misleading information on my application. I understand that my signature allows the administrators to access information such as academic records and use my essay for public purposes. My signature acknowledges that I understand the parameters of the scholarship and, if selected as a recipient, I will write a thank you letter/card to the donor.

I hereby authorize the Department of Agriculture, VSU and the VSU Foundation to release any and all of the above personal information provided on my application and any attached documentation such as resume and personal statements to any member or organization involved in the selection of scholarship recipients. I also authorize the School of Agriculture to release my personal statement to the scholarship donor. I understand that once released the information may no longer be under the control of the University and I release VSU and its employees and agents from any claims, damages or liability which I may have in connection with this scholarship.

__________________________  ____________________
Signature of Applicants    Date

Submit your TYPED, completed application to the
Ms. Eldridge, Department of Agriculture (Owens Hall-103)

PLEASE NOTE THAT LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED