

COOK COUNTY FARM BUREAU FOUNDATION ADULT SCHOLARSHIP APPLICATION



The Board of Directors of the CCFB Foundation sees value in County Farm Bureau Members who pursue additional Agricultural Knowledge and Leadership Training/Education. To assist members individuals, the Foundation Board of Directors may budget funds to provide tuition assistance to support training and education. Individuals may apply for the Foundation's Adult Scholarship Program by completing the application.

Guidelines for application:

- Complete the application fully prior to submitting to the CCFB Foundation for Board consideration.
- Submission requests should be typed into this form and returned to brohrer@cookcfb.org.
- Applicants must be a Cook County Farm Bureau member paid in good standing age 22 or older.
- The personal recommendation form can be used to strengthen your scholarship request
- Members may be eligible for a tuition scholarship for the ALOT or IALP training
- Members may be eligible for partial tuition reimbursement following successful completion of U of I Extension Master Gardener Training-South Cook Unit or Master Urban Farmer Training Program (MUFTP)
- Members may be eligible for tuition reimbursement of part or all of registration fees following attendance at Agricultural related education, training, or conference

I am applying for...

- ☐ Tuition Scholarship: Agricultural Leaders of Tomorrow (ALOT)
- ☐ Tuition Scholarship: Illinois Agricultural Leadership Program (IALP)
- ☐ Tuition Reimbursement: Master Gardener Training through University of Illinois Extension-Cook County
- ☐ Training Reimbursement: Master Urban Farmer Training through University of Illinois Extension-Cook County
- ☐ Training Reimbursement: Agricultural Training / Education / Conference

Name: _____ Date of Birth _____

Address: _____ City: _____ State: _____ Zip _____

Farm Bureau Membership Number: _____ # of Years a FB Member _____

Email Address: _____

Home/Cell Number: _____ Fax # _____

Scholarship Request

Amount Requested: _____ How will the funds be used? _____

Please explain your professional goals and objectives. Include any contributions you expect to make to agriculture/agri-business and how this scholarship will help you achieve these goals.

[illegible]

Education
(Please complete areas that apply)

High School Name: _____

Address: _____

City: _____ State: _____ Zipcode: _____ Year of Graduation _____

College/University Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Year of Graduation _____
(or expected graduation)

Field of Study – Major/Minor _____

College/University Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Year of Graduation _____
(or expected graduation)

Field of Study – Major/Minor _____

Other Studies/Training

Program Name/Affiliation: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Year _____

Description of studies/Training: _____

Career

What is your current occupation? Company Name/position if not self-employed

Please describe your primary duties?

Please describe your experience in agriculture/agri-business:

What other jobs or positions have you held during your adult working career? Please include timeframes.

Leadership

Please identify areas of leadership you serve/have served and describe position, organization and responsibilities:

What community activities have you participated in?

Any other information you would like to share to support your interest in this scholarship?

I solemnly declare the foregoing answers are true and correct to the best of my knowledge and belief.

Applicant Signature

Date

Cook County Farm Bureau Foundation
Adult Scholarship Program
Personal Recommendation

Applicant's
Name _____

Date _____

To the Recommender:

The Cook County Farm Bureau Foundation Adult Scholarship Program is designed for persons who have demonstrated leadership potential in agriculture and are interested in furthering their education and training to better serve the industry of agriculture. The Foundation Board of Directors requires your recommendation before a candidate will be considered. This information will only be used by the Foundation Board for scholarship considerations and is **strictly confidential**.

Please direct your evaluation to the applicant's own capability, potential, and commitment to agriculture and his/her community.

How long have you known the applicant? _____

How well do you know the applicant?

_____ Thoroughly _____ Fairly Well _____ Superficially _____ Not at all

Describe nature of contact with applicant:

In evaluating the following categories, "superior" would be used sparingly and only when truly warranted. "Excellent" is a strong rating, "good", "fair", and "poor" are self-explanatory.

	Superior	Excellent	Good	Fair	Poor
a. Esteem in which he/she is held in community					
b. Ability to communicate					
c. Demonstrated leadership					
d. Potential for growth through this program					
e. Ability to work with others					
f. Objectivity: Analyzing new ideas					
g. Overall assessment of leadership potential					

Based on your experience with the applicant, please state why you believe the applicant and agriculture would benefit by his/her receipt of a Cook County Farm Bureau Foundation Adult Scholarship.

Describe one outstanding personal quality of this individual.

Signature of Recommender_____

Address_____

Phone Number_____

Please return to:

Cook County Farm Bureau Foundation
Bob Rohrer, Executive Director
6438 Joliet Road
Countryside, IL 60525
brohrer@cookcfb.org