



## **ALLIED COOPERATIVE SCHOLARSHIP PROGRAM**

### **Objectives**

The primary goal of the Allied Cooperative Scholarship Program is to encourage area youth to prepare for a career in agriculture. This scholarship program is designed to provide college financial assistance to Allied Cooperative members and/or their dependents.

### **Scholarship Amount**

Allied Cooperative will offer twelve \$1,000 scholarships to full-time students, with a preference given to agricultural majors. The number of scholarships awarded may vary based on quantity of applications.

### **\$1,000 Scholarship Eligibility/Instructions**

1. Applicant shall be an Allied Cooperative member or a dependent of an Allied Cooperative member at the time of application.
2. Applicant shall be a full-time student that has been accepted into a college program. (Preference may be given to a student pursuing an agricultural degree.)
3. Applicant must submit:
  - Completed application form
  - Your high school and current grade transcript
  - Short essay on the role of agriculture in the community and your future career goals
  - A photo for follow-up publicity (Digital photos preferred. Photos may be submitted to [info@allied.coop](mailto:info@allied.coop). Reference scholarship application when emailing photo.)

### **Application Deadline**

The final date for application is April 1, 2023.

### **Mail to:**

Applications must be mailed to:  
Allied Cooperative  
Attn: Karmen Bernacchi  
P.O. Box 729  
Adams, WI 53910



## 2023 SCHOLARSHIP APPLICATION

### ABOUT YOURSELF

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

Current Status (check one):      High School (   )      College (   )      Non-traditional (   )

Home address: \_\_\_\_\_  
*Street*      *City*      *State*      *Zip*

Home phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Are you an Allied Cooperative member or a dependent of an Allied Cooperative member? \_\_\_\_\_

Membership Account Number: \_\_\_\_\_

Father's Name (or Guardian): \_\_\_\_\_ Occupation: \_\_\_\_\_

Mother's Name (or Guardian): \_\_\_\_\_ Occupation: \_\_\_\_\_

What is your current educational status? (specify grade level) \_\_\_\_\_

What school do you currently attend? \_\_\_\_\_

What is the name of your Guidance Counselor (if applicable) \_\_\_\_\_

What college will you attend in the 2022 -2023 school year? \_\_\_\_\_

What is/will be your academic major in college? \_\_\_\_\_

What are your career plans? \_\_\_\_\_

### EMPLOYMENT

<u>Employer</u>	<u>Position/Title</u>	<u>Period of Employment</u>
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a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

## **ACTIVITIES**

Major school and community activities including while in high school or college: (Specify the year.)

<b><u>Name of activity</u></b>	<b><u>Year</u></b>	<b><u>Name of Activity</u></b>	<b><u>Year</u></b>
a. _____	_____	f. _____	_____
b. _____	_____	g. _____	_____
c. _____	_____	h. _____	_____
d. _____	_____	i. _____	_____
e. _____	_____	j. _____	_____

## **REFERENCES**

Give the names and contact information for three personal references: (no relatives please)

a. \_\_\_\_\_

b. \_\_\_\_\_

c. \_\_\_\_\_

## **SIGNATURE**

Signature: \_\_\_\_\_

Parent's Signature (if applicant is a minor): \_\_\_\_\_

*Return completed application along with high school transcript, essay, and photo **by April 1, 2023** to:*

*Allied Cooperative*

*Attn: Karmen Bernacchi*

*P.O. Box 729*

*Adams, WI 53910*

*info@allied.coop*