NEBRASKA GRAIN SORGHUM PRODUCERS ASSOCIATION

ANNUAL SCHOLARSHIP

APPLICATION DEADLINE: FEBRUARY 1

Nebraska Grain Sorghum Producers annually awards a \$400 scholarship to a graduating high school senior or a student currently enrolled in post high school education. To qualify, the student must plan to pursue a course of study, which will prepare him or her for a career in agriculture or an ag-related field. The scholarship is limited to one per recipient.

The screening and selection of the scholarship recipient will be done by a special Scholarship Committee appointed by the Nebraska Grain Sorghum Producers Association. The committee will select one winner and one alternate winner. The winner will be selected and notified by May 1st of each year, in time for spring commencement ceremonies, if appropriate. The proceeds of the scholarship will be applied to the winning candidate's tuition or other educational expenses.

ELIGIBILITY REQUIREMENTS

- 1. Applicant's parent or guardian must be a member of the Nebraska Grain Sorghum Producers Association;
- 2. Applicant must be currently enrolled in post high school education or enrolled for the fall semester after graduating from high school;
- 3. Applicant must show production agriculture or a related area as his or her intended career;
- 4. The scholarship recipient may be invited to attend Nebraska Grain Sorghum Producers Association's annual conference for introduction to the members of the Association.

APPLICATION PROCEDURE

This application form must be typed or clearly printed in ink. All responses must fit within The space allotted; additional pages will not be considered by the Selection Committee.

Application Deadline: **Febru	ary 1st of Each Year(**Mus	st be postmarked by F	ebruary 1 st)
Applicant's Name		Male	Female
Address (if different from that o	of Parent or Guardian)		
Street or Route	City	State	Zip Code
Parent/Guardian's Name:			
Address:	City	State	Zin Codo
Phone:	City County:	State	Zip Code

Parent/Guardian is a member of NeGSPA? Yes No		
If "No", Please complete the Membership Application on Page 4		
If "Yes", Membership I.D. Number:		
Average Number of Acres of Grain Sorghum Grown:		
High School:	0"	
Local Newspaper	City	
Address City	State	Zip Code
Have you previously applied for a NeGSPA Scholarship?	Yes _	No
Applicant is currently:		
(a) A high school senior, enrolled for fall classes after gradua	tion at:	
(Name of Institution)		
(b) Enrolled in post high school education at:		
(Name of Institution)		
contributions you have made to these activities.		
Describe briefly your career plans in production agriculture or	an ag-related field	
In what ways have you shown involvement and interest in agri	iculture?	

	ue a career in agriculture?	
How will your proposed post hi agriculture?	igh school education plans prep	are you for a career in
How do you plan to finance the	education for your intended care	eer?
Date of High School Graduation:	Date of Applicat	ion:
Signature of Applicant:	Signature of Parent/Guardiar	n:
	FOR HIGH SCHOOL STUDENTS	
This section is to be completed by	y the high school superintendent, p	principal or counselor.
Applicant's Grade Average for High School Years	Applicant's Numerical Rank	Number of Pupils in Graduating Class
Atta	ach a copy of applicant's grade transcr	ipt.
Signature of Official:	Title:	Date:

FOR APPLICANTS CURRENTLY ENROLLED IN POST HIGH SCHOOL EDUCATION

Attach a copy of applicant's grade transcript.

FOR ALL APPLICANTS

Important: All applicants shall request a letter of recommendation from their counselor or advisor which shall be forwarded directly to the Scholarship Selection Committee at the address below.

Return To: Nebraska Grain Sorghum Producers Association

P.O. Box 94982

Lincoln, Nebraska 68509-4982

Phone: 402/471-3552

_Submit your application by February 1st.

How did you learn of the Nebraska Grain Sorghum Producers Association Scholarship?

NEBRASKA GRAIN SORGHUM PRODUCERS ASSOCIATION MEMBERSHIP APPLICATION

Name	Phone Number				
Address	City	State	Zip Code		
Date of Application	Authorized Signatu	ıre			
Please remit \$60 for a one-year mem completed application form, to:	bership or \$150 for a three-ye	ar membership, alo	ng with this		
Nebraska GSPA,	P.O. Box 94982, Lincoln, NE	68509-4982			
APPLICANT'S CHECKLIST					
Ensure all responses fit with	nin space allotted;				
Include a copy of your trans	cripts;				
Include a letter of recomme	endation from a counselor or	advisor;			
Obtain necessary signature	s;				
Check your membership sta	atus: submit membership form	n with your check, if	applicable;		