



2024  
CHEROKEE COUNTY AGRI-BUSINESS  
COMMITTEE 2ND YEAR SCHOLARSHIP  
APPLICATION

*Please type or print neatly.*

Date \_\_\_\_\_

**PART I. GENERAL INFORMATION**

Name \_\_\_\_\_ Do you reside in Cherokee County? \_\_\_\_\_

Home Address \_\_\_\_\_  
*(Street or PO Box) (Town & State) (Zip Code)*

E-Mail Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_

College Attending \_\_\_\_\_ Expected College Graduation Date \_\_\_\_\_

What is your major area of agricultural study? Please be specific \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parents' Names \_\_\_\_\_

Parents' Address \_\_\_\_\_  
*(Street or PO Box) (Town & State) (Zip Code)*

Parents' Occupations \_\_\_\_\_

**PART II. ACADEMIC INFORMATION**

What is your current GPA? \_\_\_\_\_

Please enclose a college transcript which includes your current classes. An unofficial transcript will work.

**PART III. ACTIVITIES** (attach additional pages if needed for this section)

Briefly summarize your college experience and activities.

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**PART IV. FINANCIAL INFORMATION**

Since financial need is one factor in selecting the scholarship, the following information is critical to the selection committee in their deliberations. The information is strictly confidential and will only be reviewed by the members of the selection committee.

What are your expected education expenses for the next year?

Tuition \_\_\_\_\_ Room & Board \_\_\_\_\_ Other \_\_\_\_\_ Total \_\_\_\_\_  
(books & personal)

How is your education being financed? \_\_\_\_\_

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Do you have a scholarship or tuition waiver for the 2023-2024 school year? \_\_\_ If so, please complete the following and also indicate if you are waiting for a decision on a scholarship or tuition waiver.

**Name of Scholarship or Waiver**

**What is its value?**

_____	_____
_____	_____
_____	_____

Approximately what percent of your education expenses are paid by your parents? \_\_\_\_\_

Do you (or will you) work during the year to support your education? \_\_\_\_\_

If so, approximate: Hours/week? \_\_\_\_\_ Annual earnings, all sources? \_\_\_\_\_

Where? \_\_\_\_\_ Type of work? \_\_\_\_\_

Do you work during the summer? \_\_\_\_\_ If so, where? \_\_\_\_\_

Type of work? \_\_\_\_\_

Do you have any other sources of income? \_\_\_\_\_ If so, detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any debts? \_\_\_\_\_ If so, detail amount and description of debts. \_\_\_\_\_

\_\_\_\_\_

Marital status (check one):      Single \_\_\_\_\_      Married \_\_\_\_\_

   No. Dependents \_\_\_\_\_      Ages \_\_\_\_\_

Name of spouse \_\_\_\_\_      Occupation \_\_\_\_\_

Approximate amount in savings, checking account, cash? \_\_\_\_\_

Number of siblings \_\_\_\_\_ ages of siblings \_\_\_\_\_ number who are attending college \_\_\_\_\_

Why do you feel you qualify for financial assistance? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that to the best of my knowledge; the above information is correct and complete.

Student's signature \_\_\_\_\_      Date \_\_\_\_\_

**IMPORTANT:** Applicant **must** sign the application.

**NOTE:** THE STUDENT MUST BE ENROLLED IN A COLLEGE/UNIVERSITY AT FULL TIME STATUS, PAYING FULL TIME TUITION TO BE ELIGIBLE TO RECEIVE A SCHOLARSHIP PAYMENT.

**APPLICATION MUST BE POSTMARKED ON OR BEFORE  
April 1, 2024.**

**PLEASE SEND COMPLETED APPLICATION TO**  
*2024 Agriculture Scholarship*  
*Cherokee Area Economic Development*  
*201 West Main Street*  
*Cherokee, IA 51012*