

# The Ohio Holstein Women's Scholarship

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

Address (Home) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Parents Name(s) \_\_\_\_\_

Date of High School Graduation: Month \_\_\_\_\_ Year \_\_\_\_\_

High School Attended \_\_\_\_\_

Address of High School \_\_\_\_\_

Are you a resident of Ohio? Yes \_\_\_\_\_ No \_\_\_\_\_

Were you active in a youth organization such as 4-H, FFA, or FHA? Yes \_\_\_ No \_\_\_

If so, which organization and for how many years? \_\_\_\_\_

Name of College or University which you are attending \_\_\_\_\_

Address of College or University \_\_\_\_\_

College phone number \_\_\_\_\_

Name of academic counselor \_\_\_\_\_

How many quarters/semesters have you successfully completed as of this date?  
\_\_\_\_\_

What is your cumulative grade point average to date? \_\_\_\_\_

What is your major area of study? \_\_\_\_\_

Are you presently in good academic/disciplinary standing at your college? Yes \_\_\_  
No \_\_\_

If no, Why? \_\_\_\_\_

References: List three references (other than family members) and their phone numbers. Additional pages may be used for comments.

1. Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Name \_\_\_\_\_

Occupation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Required Materials: Additional pages may be attached.

Step 1: Please enclose a current photograph of the applicant. You may enclose a self-addressed envelope for photograph return.

Step 2: Discuss and list your experiences on the farm:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Step 3: List your experiences off the farm ...other jobs or additional work experience.

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\_\_\_\_\_

\_\_\_\_\_

Step 4: Personal Recognition.

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Step 5: Please complete the following essay. Additional pages may be attached.  
How do you personally plan to contribute to agriculture or the dairy industry in the future?

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I affirm that the information reported on this application is accurate and true to the best of my knowledge.

Date: \_\_\_\_\_

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

**Application Due: March 1, 2019**

Return to: Ohio Holstein Women  
P.O. Box 479  
Wooster, OH 44691  
oholstein@sssnet.com