

# SHAWNEE COUNTY FARM BUREAU ASSOCIATION Please NOTE new address: PO BOX 4050, Topeka, KS 66604 785-273-7077 shawneefb@kfb.org

#### **COLLEGE SCHOLARSHIP APPLICATION - 2025**

**ELIGIBILITY:** Scholarship awarded to student who has completed a minimum one year or 23 credit hours at a Kansas four-year college, Junior college or vocational technical school. And, continue to attend a college or vocational technical school within Kansas. Student must have a post secondary education GPA of 2.7 or above. **Send copy of Spring 2025 transcript for verification.** 

Applicants need to be a student whose parents or grandparents are members of Shawnee County Farm Bureau Association.

Preference will be given to student in Agriculture studies.

Proof of enrollment must be furnished by Oct. 1, 2025. Failure to provide proof will forfeit scholarship and monies will need to be returned to Shawnee County Farm Bureau Association.

**APPLICATION:** Application available from the Shawnee County Farm Bureau Association, 3801 SW Wanamaker Rd. Topeka, KS 66610 or by calling 785-273-7077.

Application and transcript must be submitted together and received by June 1, 2025

Please email application to Shawneefb@kfb.org and ask for a response that the application has been received or the application can also be mailed to PO BOX 4050, Topeka KS, 66604.

**SELECTION OF RECIPIENTS:** A committee appointed by the Shawnee County Farm Bureau Board of Directors will screen Applications. The recipients will be notified of their selection by mail or phone call. If for any reason the recipient cannot use the scholarship, another recipient will be selected. If student doesn't complete at least one semester, the scholarship would have to be repaid. The Scholarship amount for 2025 will be \$1,000.

### SHAWNEE COUNTY FARM BUREAU ASSOCIATION \$1,000.00 COLLEGE SCHOLARSHIP

#### **APPLICATION FOR 2025**

(This cover sheet will be removed before judging)

NAME	DATE OF BIRTH	
ADDRESS		
CITY	_ STATE	ZIP
PHONE		
NAME OF SCHOOL ATTENDING		
PARENT'S NAME		
ADDRESS		
CITY	_ STATE	ZIP
FARM BUREAU MEMBERSHIP NUMB	ER OF PARENT O	R GRANDPARENT
NAME ON MEMBERSHIP		
Membership must be in Shawnee Count	y	

## APPLICATION FOR SCHOLARSHIP AWARDED by SHAWNEE COUNTY FARM BUREAU ASSOCIATION THIS APPLICATION MUST BE TYPED.

1. What have you learned in college that has helped prepare you to meet your career goals?
2. What Kansas University, Junior College, or Vocational Technical School do you attend?
3. List any school extra curricular or community activities in which you have participated and academic awards or honors received during your senior year of high school and while in college.
4. What are your post-secondary education goals?

5. What type of job do you plan to have in five to ten years?

In 250 words or less describe why you feel you should receive this scholarship. Describe your personal goals for the future and what you envision you will be doing five years from now and how this scholarship will help make it possible.