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| **2019**  **Kern Ag Foundation**  **Joe D. Garone Memorial Ag Scholarship**  **Amount of Scholarships – $1,000** |

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| **Application Instructions** |

**Instruction to you, the applicant,**

Careful observance of the following instructions will provide uniformity between applications and make it possible for the Scholarship Committee to evaluate each applicant fairly.

If you have any questions, please call Douglas Starr at (661) 395-6894, or email him at [dstarr@calcot.com](mailto:dstarr@calcot.com).

**NOTE: IF YOU WISH TO DOWNLOAD AN APPLICATION AND SUBMIT ONLINE, CONTACT DOUGLAS STARR AT** [dstarr@calcot.com](mailto:dstarr@calcot.com).

Please read all of the instructions before you proceed with any part of your application.

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| **The Application is complete when all the following are submitted:** | |
| Part 1 | The 2 page Application Form – **enclosed.** To be filled out and submitted. |
| Part 2 | The Applicant’s Letter – **enclosed.** To be written by applicant and submitted. You do not have to use this format. You can send your own letter either handwritten or typed. |
| Part 3 | Confidential Statement – **enclosed.** To be filled out and submitted (OPTIONAL – NOT REQUIRED). |
| Part 4 | Transcript of School Records – **instruction enclosed.** To be submitted by your school. |

If you also wish to submit a **Letter of Reference** from a non-family member, we will gladly consider it, but it is not absolutely necessary to complete your application.

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| **NOTE: PART 1, PART 2, PART 3 & PART 4 ARE TO BE MAILED BY Friday, March 22, 2019 TO:** |

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| To be Mailed By Friday, March 22, 2019: | |
|  | |
| Part 1 | To be sent by mail or email by you, the applicant. |
| Part 2 | To be sent by mail or email by you, the applicant. |
| Part 3 | To be sent by mail, fax or email by person filling it out. |
| Part 4 | To be mailed by the Registrar at your school. |

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| **Kern Agricultural Foundation**  Joe D, Garone Memorial Ag Scholarship  c/o Douglas Starr  3307 Petite Sirah Street  Bakersfield, CA 93306 |

To assist you, the applicant, please read the information on the next two pages regarding:

Part 1 - The Application Form.

Part 2 - Applicant’s Letter.

Part 3 - The Confidential Statements – OPTIONAL, NOT REQUIRED.

Part 4 - Transcript of School Records.

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| Page 1 of 3 Application Instructions |

**Requirements to Submit an Application:**

**To be eligible to submit a scholarship application,**

**👉 You must be currently attending college or you must be in your final year of high school.**

**👉 You must have your permanent residence in Kern County.**

**👉 If you are a high school senior, you must be considering an Ag related major in college.**

**👉 If you are in college, you must be pursuing an Ag related major. “Ag related” refers to food**

**science, fiber crops (such as cotton), and animal science. It also includes Ag related fields**

**such nutrition majors, soil science and genetic research in crops or animals.**

**The above are examples but are not a comprehensive list of ag majors.**

**👉 You must be enrolled for the fall 2019 term, as a full-time student, with a minimum of 12**

**credits.**

**👉 You must have maintained a minimum of a “B” average (3.0) in each of your last 2 years**

**in school.**

**👉 You must attend any applicant interviews scheduled in Bakersfield.**

**👉 Make every attempt to attend the Scholarship Award Banquet, which will be held on**

**Wednesday, May 1, 2019 at the Kern Ag Pavilion in Bakersfield.**

The Kern Ag Foundation, at its sole discretion, may or may not award a scholarship to students who

do not finish college within four years. In other words, fifth year senior, even though they may have received a scholarship in the past, may not receive a scholarship for their fifth year.

Part 1

Instructions for:

The Application Form

**👉** Fill in any sections that pertain to you.

Note: 👉 When you have completed the 3 pages, make a copy for

This part may be yourself and mail or email the Application to Douglas Starr,

submitted online. at the street or email address on page 1 of this Application

Form.

👉 If you have any questions, please contact Douglas Starr at

(661) 395-6894 or email him at [dstarr@calcot.com](mailto:dstarr@calcot.com)

NOTE: BEFORE YOU MAIL OR EMAIL THIS FORM, PLEASE PRINT A COPY TO MAKE SURE

ARE CORRECT. MAKE ANY NECESSARY BORDER ADJUSTMENTS YOU DEEM APPOROPATE.

The Applicant’s Letter

Part 2

Instructions for:

👉 The letter should be one or two pages long, approximately 300

words.

👉 The Scholarship Committee wants to know about you, the

This part may be applicant. Tell us about your life, your interests and your

submitted online. interest in agriculture and why you are seeking a scholarship.

Don’t try to make yourself look like a superstar. We just want to

know who you are and what you are like.

👉 This should be a letter, not a bullet point list of your achievements.

👉 If you wish to list your achievements and awards in the field

of agriculture or animal science, please attach the list separately.

👉 When you have completed The Applicant’s Letter, make a copy

for yourself and mail it along with Part 1 to the address on page 1 of this Application Form.

👉 If you have any questions, please contact Douglas Starr at

(661)395-6894 or email him at [dstarr@calcot.com](mailto:dstarr@calcot.com)

The Confidential Statement – OPTIONAL, NOT REQUIRED.

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| Page 2 of 3 – Application Instructions |

Instructions for:

Note: 👉 This is an opportunity for someone you know to say some nice things

Part 3

you.

👉 Give the form to someone you know, ask them to fill it in and ask them

to mail it to the address on the form. Give them an envelope, stamped addressed. This will assist them and it will also make it more likely

that they will fill it in right away.

👉 Do not give the form to a relative. The Scholarship Committee wants to

hear about you from a teacher or a former employer or Ag advisor or

school counselor.

👉 **Ask the person who fills this in to mail the form to:**

**Kern Agricultural Foundation**

Joe D. Garone Memorial Ag Scholarship

c/o Douglas Starr

3307 Petite Sirah Street

Bakersfield, CA 93306

**Or email this form to Douglas Starr at** [**dstarr@calcot.com**](mailto:dstarr@calcot.com)

Instructions for:

Part 4

The Transcript of School Records

Very Important Note: 👉 Request this from the Registrar at your school.

If you are in college 👉 Ask the Registrar to send your most complete and latest transcript to the

and are a Freshman or address on page one (1) of this Application Instruction form.

Sophomore, we will

also need your high

school transcript.

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| **How the Kern Ag Foundation $1,000 Joe D. Garone Ag Scholarship will be awarded:** |

After the Scholarship Committee has made its selection of the recipients for the 2019 scholarships, each

applicant who has sent in all required materials will be notified.

*Each recipient will be invited to attend the Scholarship Award Dinner, which will be held on* ***Wednesday,***

***May 1, 2019*** *at the Kern Ag Pavilion in Bakersfield.*

At that award ceremony, the recipients will receive a certificate acknowledging their award of the scholarship.

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| **What the Recipients Must Do To Have Their $1,000 Check Sent to Them.** |

**The recipients will receive a $1,000 check, made out to them personally in the fall of 2019, after**

**the Scholarship Committee receives notice that the recipient is enrolled as a full-time student at**

**an accredited college or university (at least 12 credits hours/semester).**

1. Send proof of enrollment for 2019 Fall Term to Scholarship Committee:

During the late Summer or early Fall, when the recipient receives their class schedule from

their college or university, they need to send that class schedule to the Scholarship Committee.

Send this to the address on page one (1) of this form.

2. Scholarship Committee will send a $1,000 check to recipient:

When the Scholarship Committee receives proof of enrollment for the 2019 Fall Term, the

Committee will send a $1,000 check made out to the recipient personally to the address provided by

the recipient.

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| Page 3 of 3 – Application Instructions |

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| **2019 Kern Ag Foundation**  **Joe D. Garone Memorial Ag Scholarship – Application Form**  **Amount of Scholarships – $1,000** |

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Name of Applicant:

First Middle Last

|  |  |  |
| --- | --- | --- |
| Street |  |  |
| City |  |  |
| Zip Code |  |  |

Mailing Address:

Telephone (home) Cell Phone

|  |  |
| --- | --- |
| ( ) | ( ) |

Date of Birth:

|  |  |  |
| --- | --- | --- |
|  |  |  |

Month Day Year

Age of Applicant: Email Address

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Name(s) of Parent(s) or Guardian(s):

|  |  |  |
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|  |  | ( ) |

Name Relation to You Phone

Name(s) of Parent(s) or Guardian(s):

|  |  |  |
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|  |  | ( ) |

Name Relation to You Phone

WHAT SCHOOL ARE YOU CURRENTLY ATTENDING? Mark year you are in school

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | FR |  | SO |  | JR |  | SR |

WHAT SCHOOL ARE YOU PLANNING TO ATTEND NEXT YEAR?

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|  | FR |  | SO |  | JR |  | SR |

What year will you be in school in the fall of 2019?

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|  |

WHAT COURSE OF STUDY WOULD YOU LIKE TO PURSUE?

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|  |

AFTER COLLEGE, WHAT TYPE OF WORK WOULD YOU LIKE TO DO?

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Number of Parent(s) or Guardian(s) | | | | | | | | |
|  | Yourself | | | | | | | | |
|  | Number of Brothers | Ages |  |  |  |  |  |  |  |
|  | Number of Sisters | Ages |  |  |  |  |  |  |  |

Size of Applicant’s Family:

Are any brothers or sisters currently in college? \_\_\_\_\_ Yes \_\_\_\_\_NO

If so, please tell us how many and what year are they in school: Number in School \_\_\_\_\_ Year in School \_\_\_\_\_

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| Page 1 of 3 Application Form |

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| **2019 Kern Ag Foundation**  **Joe D. Garone Memorial Ag Scholarship – Application Form**  **Amount of Scholarships – $1,000** |

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Name of Applicant:

First Middle Last

**For High School Seniors:**

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What high school are attending?

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|  | FR |  | SO |  | JR |  | SR |

What year are you in high school?

|  |  |  |
| --- | --- | --- |
|  | When will you graduate? |  |

When did you start at this school?

|  |
| --- |
|  |

Where will you be going to school in the fall of 2019?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Are you a member of FFA or 4-H?

If yes, Please list name and phone number of FFA/4-H Leader. Name Phone

|  |  |
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**For College or University Students:**

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| What high school did your attend? |  |
| What year did you graduate from high school? |  |
| What college or university are you currently attending? |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| What year are you now at college or university? |  | FR |  | SO |  | JR |  | SR |
| What year will you be in school in the fall of 2019? |  | FR |  | SO |  | JR |  | SR |

|  |  |
| --- | --- |
| If you have declared a major, what is it? |  |

|  |  |
| --- | --- |
| What year did you enter the college or university? |  |
| When will you graduate? |  |

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| --- | --- | --- | --- |
| Yes |  | No |  |

Are you a member of any Ag related club or service organization?

**For both High School and College/University Students:**

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| --- |
| **If yes, what Ag related groups are you a member of?** |
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| **What are your post-graduate plans?** |
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| **Briefly explain your activities:** |
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| Page 2 of 3 |

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| **2019 Kern Ag Foundation**  **Joe D. Garone Memorial Ag Scholarship – Application Form**  **Amount of Scholarships – $1,000** |

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| **Applicant’s Letter** |

**Note: If you do not want to use this page for your letter, write “See Attached Letter” and send it as an attachment.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Applicant:** |  |  |  |

**First Middle Last**

Letter: (Please tell us about yourself. Pease discuss any special family or financial needs that you think we

should consider).

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| Page 3 of 3 Application Form |

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| **Confidential Statement by Ag Advisor, School Counselor, Teacher or Current or Former Employer**  **Concerning the Application of:**   |  |  |  | | --- | --- | --- | |  |  |  |   **Frist Middle Last**  **For the Kern Ag Foundation 2019 – Joe D. Garone Memorial Ag Scholarship in the amount of $1,000.**  **Please mail no later than March 22, 2019.** |

Please rate the Applicant by responding to the following questions:

1. Please comment on the Applicant’s degree of ambition for higher education and how higher education

would benefit this applicant: (any special financial needs)

2. What is the Applicant’s standing in your class? (if applicable)

3. Please comment on the Applicant’s personality and leadership qualities:

|  |  |
| --- | --- |
| Please Print your Name: |  |
| Signature: |  |
| Position: |  |
| Date Completed: |  |

After completion, please **email** this to: [dstarr@calcot.com](mailto:dstarr@calcot.com) Or **fax** this form to: Douglas Starr

If you email this document, call Douglas Starr at (661) 395-6894 to let him know you have emailed it. If he

does not answer, leave a message telling him who you are, your phone number and when you emailed this

document. Speak slowly and clearly.

Or **mail** to:

**Kern Ag Foundation**

Joe D. Garone Memorial Ag Scholarship

c/o Douglas Starr **NO LATER THAN MARCH 22, 2019**

3307 Petite Sirah Street

Bakersfield, CA 93306

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| **2019**  **Kern Ag Foundation**  **Joe d. Garone Memorial Ag Scholarship**  **Amount of Scholarship - $1,000** |

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| **Instructions for Sending School Transcript** |

To High School Applicant:

1. Fill in your name in the area asking for your name on the form on the next page.

2. Take or mail the form to the Registrar at your high school.

3. Ask the Registrar to mail a copy to your high school transcript to the address below.

To Applicant who is a College Freshman, Sophomore or Junior:

1. Because we need the records of your last 8 semesters, you will need to provide the

Scholarship Committee with your transcript from high school as well as from the

College or university where you are currently enrolled.

Procuring your high school transcript:

1. Fill in your name in the area asking for your name on the form on the next page.

2. Take or mail the form to the Registrar at your high school.

3. Ask the Registrar to mail a copy of your high school transcript to the address below.

Procuring your college or university transcript:

1. Fill in your name in the area asking for your name on the form on the next page.

2. Take or mail the form to the Registrar at your college or university.

3. As the Registrar to mail a copy of your transcript to the address below.

To the Applicant who is a former Joe D Garone Scholarship winner:

No need to send your high school transcript. We already have it.

Please send an up-to-date transcript from your college or university.

NOTE: If you have transferred from another college or university, procure your records from

former college or university and send them in. We need your grades from the last 8

semesters.

**NOTE: 2 COPIES OF THE FORM ARE PROVIDED, IN CASE YOU NEED TO SEND FOR**

**A TRANSCRIPT FROM YOUR FORMER ACADEMIC INSTITUTION.**

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| **2019**  **Kern Ag Foundation**  **Joe D. Garone Memorial Ag Scholarship**  **Amount of Scholarship - $1,000**  **Request for Transcript** |

Name of Applicant:

|  |  |  |
| --- | --- | --- |
|  |  |  |

First Middle Last

Social Security# School ID # (if applicable)

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To the Registrar:

I am applying for the 2019 Joe D. Garone Memorial Ag Scholarship, which will be awarded

Wednesday, May 1, 2019 at the Kern Ag Foundation in Bakersfield, California.

I need a copy of my school transcript sent to the address below.

This is to be postmarked no later than Friday, March 22, 2019, for my application to be considered.

Thank you for helping me in this matter.

Please mail my transcript to: **Kern Agricultural Foundation**

Joe D. Garone Memorial Ag Scholarship

c/o Douglas Starr

3307 Petite Sirah Street

Bakersfield, CA 93306

If you need to contact Mr. Starr, to substantiate this request, he may be contacted by phone

(661) 395-6894 or email him at [dstarr@calcot.com](mailto:dstarr@calcot.com)

If you need to speak with me, the applicant, about this request, please contact me at:

|  |  |
| --- | --- |
| Applicant’s Email Address: |  |

or

|  |  |
| --- | --- |
| Applicant’s Phone Number: |  |