## Joel McRoberts Memorial Scholarship

### **Lorain Soil & Water Conservation District**

Scholarship Amount: \$1,000.00

### **BASIC REQUIREMENTS**

- 1. Must be enrolled for the fall quarter/semester 2019 at a two or four-year college or university *in Ohio*, as a full -time student.
- 2. Must be enrolled in an *agricultural or natural resource* related field.
- **3.** Must be a resident of Lorain County.
- **4.** Payment for the scholarship will be made to the student after the following:
  - —Payment receipt received for spring quarter/second semester fees (2020)
  - —2.5 GPA or better for the first quarter/semester
  - —Must be continuing his/her education in an agricultural or natural resource related field
  - —Scholarship payment must be claimed by June 30, 2020
- 5. A transcript of your high school grades must be attached to the scholarship application form. A minimum of a 2.5 grade point average is required for consideration.

Return application to: Lorain Soil & Water Conservation District

42110 Russia Road Elyria OH 44035-6813

Deadline: Must be postmarked by April 19, 2019

Please type or print clearly in black ink.

### APPLICANT INFORMATION

Name	Home Phone	
Address		
City	Zip	
How many siblings do you have?	Their ages	
Names of Parents (or Guardian)		
What school will you attend?	Applied Accepted	
What is your planned course of study?	Two-Year Four-Year	
High School attended	Year graduated: 2019	
Employment experience (Include work experience at home)		

High School Achievements	High School Activities	
(Awards, honors, leadership)	(Band, sports, clubs)	

Volunteer (community service) activities:

Please write one or two short paragraphs on your educational and career goals.

Have you been chosen or a	re you being considered for	any other scholarships for	r the 2019-2020 school year?
Yes	No		
Name of Scholarship	Amount	Being Considered	Selected
have nersonally prepared	l this application and believ	e it to be correct	
nave personant, propared	appromiss and some		
Signature of Applicant		<b>Date</b>	
ignature of rippineum		Dute	
ignature of parent or gua		 Date	
ignature of parent of gua	lulan	Date	
ERSONAL REFERENC	E (Teacher, FFA or 4-H Ac	dvisor, Minister, etc. — <u>no</u>	<u>t</u> a family member):
haracter Reference (Incl	ude an estimate of success in	n college):	
maracter Reference (inch	rue an estimate of success in	ii conege).	
ny additional asymmetry			
ny additional comments:			
			Zip
'hone		<b>Date</b>	

# RECOMMENDATION BY HIGH SCHOOL PRINCIPAL OR GUIDANCE COUNSELOR

tudent's Name	graduated from		
Number in graduating class	ss	Rank in Class	
Character Reference (Include an estimate of success in co	ollege)		
our estimation of the applicant's financial needs.			
ny additional comments:			
igned	Title		
chool			
address	C	ity	<b>Z</b> ip