

SPONSORED BY: THE ARMADA AGRICULTURAL SOCIETY (ARMADA FAIR)

- 1. The scholarship will be awarded yearly to two high school graduating seniors. Home schooled applicants will also be accepted. A concerted effort will be made to select one male and one female awardee.
- 2. Financial need or grades will not be a deciding factor for this scholarship.
- The applicant MUST have been a volunteer, employee, open class exhibitor or Youth Organizations exhibitor at the Armada Fair to apply. This would include Miss Armada and her court.
- 4. The Armada Agricultural Society Sponsorship committee will review all applications, with the final selection being approved by the Board of Directors.
- 5. The Armada Agricultural Society reserves the right to void any awarded scholarship if the individual submits fraudulent information or does not attend the institution of higher education stated on the application or another college or trade school, which has been approved by the Armada Agricultural Society. All monies would have to be returned to the Armada Agricultural Society at the applicant's expense.
- 6. The applicant cannot have a criminal record and must be a positive role model for other youth.
- 7. Applications must be postmarked no later than April 15th and may be mailed to the Armada Agricultural Society, P.O. Box 507, Armada, MI 48005, dropped off at the Armada Fair office during normal business hours or emailed to the fair office no later than 11:59PM on April 15. office@armadafair.org
- 8. The scholarship finalists may be asked to attend a private interview.
- 9. This offer is a one-time gift for high school seniors only.
- 10. The scholarship check will be made out to the school of higher learning and to the scholarship recipient.
- 11. Applicants who will be attending any institution of higher learning may apply. This would include but is not limited to trade schools, colleges or universities.

Any questions can be directed to the Armada Agricultural Society Sponsorship Committee by contacting the Armada Fair office at 586-784-5488.



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APPLICATION NUMBER:	_ (FOR OFFICE USE C	DNLY)	
NAME:	PHONE:		
ADDRESS:			
		ZIP CODE:	
DATE OF BIRTH:	ARE YOU A U.S. CITIZEN?		
MALE: FEMALE:	_		
HIGH SCHOOL:		CITY:	
COLLEGE OR INSTITUTION TO WHICH YOU HAVE BEEN ACCEPTED NAME:			
CITY:	STATE: ₋		
INTENDED CAREER GOAL:			

Your application will be assigned a number and all application reviews will be completed on an anonymous basis.



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APPLICATION NUMBER: (FOR OFFICE USE ONLY)
Please complete the following questions. Add additional sheets of paper as necessary.
1.) List all of the ways you have been involved with the Armada Fair. (Please provide verification.)
2.) List any other activities, organizations, or community service projects in which you are or have been active. Include the approximate hours of service.
3.) Describe any leadership positions you have held. How did you get the position and what have you learned from being in the position? What are the biggest challenges and how did you solve them?
4.) Tell us something unique about yourself, life, family or past. Make it honest and interesting – we want to know more about who you are!
5.) Describe any special considerations you would like to have reviewed in evaluating your application. (Optional Question.)



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APPLICANT'S SIGNATURE	DATE
9.) If you are selected for a scholarship you will be required to provide docur post-secondary educational/technical or vocational institution.	mentation of acceptance to a
8.) Provide a letter(s) of recommendation from a teacher, counselor, employ school administrator. (Up to three letters will be accepted.)	ver, community leader or
7.) Provide, via your high school counselor, an official transcript with this app	plication.
6.) On a separate sheet of paper explain your personal goals for the future, help you achieve those goals, how your education will help your community for this scholarship.	, -
APPLICATION NUMBER: (FOR OFFICE USE ONLY)	