

MIAMI SOIL AND WATER CONSERVATION DISTRICT

*"Committed to quality conservation assistance to the people we serve."*

1330 N. COUNTY ROAD 25A, STE. C

TROY, OHIO 45373

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E-mail: info@miamiswcd.org

**2024 LARRY STUDEBAKER MEMORIAL/MIAMI SWCD SCHOLARSHIP**

The Miami Soil and Water Conservation District is offering two $1,000 scholarship awards to Miami County, Ohio residents who are majoring in Agriculture or Natural Resources. The scholarships are for the purpose of continuing higher education at a two or four year college or university.

QUALIFICATIONS – Applications will be accepted from students meeting the following qualifications:

1. Must be a Miami County, Ohio resident.
2. Must be an Agriculture or Natural Resources major.
3. Must be enrolled for Fall Semester of 2024.
4. **CAN** be a prior scholarship recipient from the Miami SWCD
5. **CAN** only receive scholarship twice during one’s college career.

CONDITIONS OF THE SCHOLARSHIP – The award will be used towards the student’s tuition and fees and will be processed through the scholarship office of the chosen school.

WHERE AND HOW TO APPLY – Send the completed application to the scholarship committee:

Miami SWCD Scholarship

1330 North County Road 25A; Suite C

Troy, Ohio 45373

**Three (3) letters of recommendations from three (3) references listed on the application form are to be sent directly to the Miami SWCD**. Applications and recommendations must be received by **Friday, March 15, 2024 (POSTMARKED)**. The application and information received will be property of the Miami SWCD and will be held in strict confidence.

**LARRY STUDEBAKER MEMORIAL/MIAMI SOIL AND WATER CONSERVATION DISTRICT SCHOLARSHIP APPLICATION**

**DEADLINE: MAIL THIS APPLICATION BY FRIDAY, MARCH 15, 2024**

**C/0 THE SCHOLARSHIP COMMITTEE**

1. NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LAST FIRST MI

2. HOME ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY STATE ZIP

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE NO.

1. HIGH SCHOOL OR COLLEGE ATTENDING

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY STATE ZIP

1. COLLEGE OR UNIV INTENDED TO ENROLL OR ALREADY ENROLLED

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. DATE OF HIGH SCHOOL GRADUATION OR PRESENT YEAR IN COLLEGE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. INTENDED OR CURRENT MAJOR COURSE OF STUDY

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. PLEASE SUBMIT YOUR HIGH SCHOOL OR COLLEGE TRANSCRIPT WITH THIS APPLICATION.
2. LIST BELOW THE COURSE THAT YOU ARE PRESENTLY TAKING OR PLAN TO TAKE TOWARDS YOUR MAJOR IN COLLEGE:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. WHAT PERCENTAGE OF YOUR EDUCATION EXPENSES COME FROM:

PARENTS \_\_\_\_\_\_\_\_\_\_\_\_ SUMMER OR PART TIME WORK \_\_\_\_\_\_\_\_\_\_\_\_

LOANS \_\_\_\_\_\_\_\_\_\_\_\_ FEDERAL OR STATE GRANTS \_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOLARSHIPS \_\_\_\_\_\_\_\_\_ OTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. LIST POSITIONS OF LEADERSHIP THAT YOU HAVE HELD, AWARDS RECEIVED, AND ORGANIZATIONS PARTICIPATED IN DURING YOUR HIGH SCHOOL OR COLLEGE CAREER.

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1. LIST PLACES OF WORK/EMPLOYMENT HISTORY.

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1. GIVE THE NAME AND TITLE OF THREE REFERENCES, INCLUDING YOUR HIGH SCHOOL OR COLLEGE ADVISOR. IT IS APPLICANT’S RESPONSIBILITY TO HAVE REFERENCES SUBMIT LETTERS OF RECOMMENDATION TO THE SCHOLARSHIP CHAIRMAN BY FRIDAY, MARCH 15, 2024 (POSTMARKED). **DO NOT ATTACH LETTERS OF RECOMMENDATION TO THIS APPLICATION.**

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NAME TITLE/OCCUPATION PHONE

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NAME TITLE/OCCUPATION PHONE

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NAME TITLE/OCCUPATION PHONE

**APPLICATIONS WILL NOT BE CONSIDERED IF**

**3 LETTERS OF RECOMMENDATION ARE NOT RECEIVED**

1. ATTACH A ONE-PAGE TYPEWRITTEN LETTER DESCRIBING YOUR BACKGROUND, ATTITUDE TOWARDS CONSERVATION, OBJECTIVES OF YOUR EDUCATIONAL PROGRAM, AND CAREER PLANS.
2. I AUTHORIZE THE RELEASE OF ALL SCHOLARSHIP MATERIALS, INCLUDING REFERENCES AND TRANSCRIPTS TO THE MEMBERS OF THE SELECTION COMMITTEE.
3. PARENTS NAMES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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SIGNATURE