

# NEVADA AGRICULTURAL FOUNDATION EDUCATION ASSISTANCE AWARD APPLICATION

Educational Assistance Awards are based on enrollment in an agricultural related field of study, financial need, scholastic proficiency, character, service, and specialized talents. Please answer all the following statements to the best of your ability. Additional pages may be added if needed.

*PLEASE TYPE*

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Name (last, first, mi) \_\_\_\_\_ College I.D. # if available \_\_\_\_\_ Date of Birth \_\_\_\_\_

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Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Telephone No. \_\_\_\_\_ email address \_\_\_\_\_ High School Attended or Attending \_\_\_\_\_

Year Graduated: \_\_\_\_\_ College you plan to attend: \_\_\_\_\_

Are you currently enrolled in an institution of higher education? Yes \_\_\_ No \_\_\_

If yes, where? \_\_\_\_\_

What is your planned major? \_\_\_\_\_

Explain how this major will relate to your future Agricultural career goals.

GPA \_\_\_\_\_ ACT \_\_\_\_\_ SAT \_\_\_\_\_

Note: **This application must be accompanied by your high school transcripts** *showing work for the first seven semesters completed OR, if you are enrolled at a university or college, a current copy of your college transcript(s) together with your complete high school transcripts.*

School Activities in which you have participated:

Name \_\_\_\_\_

Positions of Leadership:

Community Service Activities:

Honors Received:

4-H Member: \_\_\_\_\_  
Yes or No                      No. of years

FFA Member: \_\_\_\_\_  
Yes or No                      No. of years

List and describe your activities/experience related to agriculture.

Name \_\_\_\_\_

List any circumstances or information that you feel has a bearing on your financial situation or need. Attach additional page(s), if necessary. We are not asking for your financial records, but how a NAF award will assist in pursuing educational goals.

Please explain why you are deserving of a Nevada Agricultural Foundation Award.

Please provide the following information so that we may publicize your award

Parent/Guardian Name(s): \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Hometown Newspaper: \_\_\_\_\_



**The above information is true and accurate to the best of my knowledge.**

Signature: \_\_\_\_\_

Date \_\_\_\_\_

*applicant*