



GLADES AGRICULTURAL SCHOLARSHIP FUND, INC.
AGRICULTURAL SCIENCE SCHOLARSHIP
AVIATION SCHOLARSHIP

**Mailed or received no later than
April 15, 2019
c/o J.D. Lee**

50 Airport Road-Belle Glade, Florida 33430

The Glades Agricultural Scholarship Fund, Inc. committee will be awarding agricultural science scholarship to outstanding students from selected high schools in the agricultural areas surrounding Lake Okeechobee. The award is a 1-year, \$2,500 scholarship to the college, university, tech school of your choice.

The selection criteria are as follows:

1. **Financial Need**-the student must have applied for financial aid and show financial need
2. **Academics**-the student must have a minimum 2.5 overall GPA
3. **School and Community Involvement**-the student must demonstrate involvement and participation in school and community activities
4. **Work Experience**-consideration may be given for the student's work history
5. **Recommendations**-consideration will be given to the required recommendation letters
6. **Essay**-consideration will be given to the student's required essay

To apply for the Glades Agricultural Scholarship, the student must:

1. Complete(type or print) the Scholarship Application in its entirety.
2. Submit no more than 2 letters of recommendation from non family members.
3. Provide a copy of the student's official high school transcript.
4. Submit one essay addressed in "Supplemental Essay."
5. Submit a copy of your FAFSA application and response(if received)
6. Be a Palm Beach, Hendry, Glades, Martin, St. Lucie or Okeechobee County, Florida resident.

We have read and understand the above criteria and requirements above.

Student's Signature _____

Date _____

Parent's Signature _____

Date _____



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APPLICANT INFORMATION
 (NO PHOTOS, PLEASE)

High School: _____ Date: _____

STUDENT NAME: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Home Phone # _____ Cell Phone# _____ Email Address _____

Father's Name: _____ Occupation/Employer: _____

Address, if different than Student: _____

Mother's Name: _____ Occupation/Employer: _____

Address, if different than Student: _____

Student resides with: Mother & Father Mother Father Guardian Relative

Ages of brothers and sisters living at home _____

Number of brothers and sisters currently in college _____

Please list your work experience:(Attach additional sheets if necessary)

Dates	Employer	Duties	Hours per Week

Please list any extracurricular school activities(sports, clubs, extra curricular, etc.) in which you participate:(Attach extra sheets if necessary)

Activity	Years	# Hours Involved	Offices held

Please list any honors or awards you have received:(Attach extra sheets if necessary)

Honor or Award	Year	Nature of Honor or Award

Please list verified school service community hours and any other activities you are involved with that are not school related:(Attach extra sheet if necessary)

Activity	# of Hours(wk., yr., etc.)	Years
Verified school community hours	Total Hours-	
Other-		

What school do you plan to attend? _____

Have you been accepted? __Yes __No __Waiting to be accepted

What agricultural science field of study do you plan to pursue? _____

What Scholarships have you received or are a finalist for: (Attach additional sheets if necessary)

Name of Scholarship	Received or Finalist?	Term & Approximate Value

Are you a participant in the Florida Prepaid College Tuition Plan for: a)Tuition only __Yes__ No

b)Tuition and Room & Board __Yes__ No

Are you a participant in the Florida College Tuition Investment Plan? __Yes __No If yes, what is the current value? \$ _____

Have you applied for Financial Aid (FAFSA) __Yes__ No

I understand and agree to keep the Glades Agricultural Scholarship Fund, Inc. committee informed as to my progress through the educational process if I am a recipient of one of their scholarships. I also agree to attend at least one Glades Agricultural Scholarship Fund committee meeting per year during the course of my scholarship. I certify that all of the statements made with regard to this scholarship application are true and correct and that false statements will automatically disqualify me from consideration.

Applicant's Signature: _____

Date: _____

Print Name: _____

Signature of Parent or Guardian: _____

Date: _____

Print Name: _____

Guidance Department Only-Must Complete

GPA: _____ Class Rank: _____ SAT(math & critical reading only) _____ or ACT: _____

Verified Community Hours _____

List any known financial aid to be received by student:

Signature of Guidance Counselor or Verifier: _____



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SUPPLEMENTAL ESSAY

For all scholarships please respond, on separate pages, to the following Essay question.

Briefly explain why you deserve this scholarship, including your goals, and how this Scholarship will help you achieve those goals. Please also discuss any compelling reason(s) you may consider important for our consideration in awarding the scholarship. This to be accomplished in 350 words or less.