MICHIGAN AGRI-BUSINESS ASSOCIATION SCHOLARSHIPS

MABA Scholarships are authorized by the MABA Educational Trust to encourage post high school education at a college or university. The scholarships are for MABA members, children of members, employees of members, or those recommended by members.

Scholarships are available each semester, providing the student:

- Is enrolled in a minimum of 12 credits each semester.
- Maintains a satisfactory grade point average (3.0 or better).
- Is pursuing an agriculture related major and/or directly associated with the industry through family ties (employee of a member) or themselves working for a member.
- Successfully completes, or willing to complete, an internship with a MABA member.
- Provides two (2) letters of recommendation with the application (one must be from a MABA member).

Applications must be in the offices of the Michigan Agri-Business Association no later than June 1st (for Fall Semester), or October 1st (for Spring Semester).

The scholarship check will be sent to the address provided on the application, and made out to the student.

**Recipients can receive the scholarship for a maximum of four (4) semesters.**

Submit the completed application form and two letters of reference (one must be from a MABA member) by mail, email or FAX to:

**Scholarship**  
Michigan Agri-Business Association  
2500 Kerry St. Suite 102  
Lansing, MI 48912  
Email: maba@miagbiz.org  
FAX – 1-866-829-3786
SCHOLARSHIP APPLICATION  
MICHIGAN AGRI-BUSINESS ASSOCIATION

Date: ___-___-___

PERSONAL DATA

Name: ___________________________ Age: ______ Telephone: _______________________

Address: _________________________________________________________________

City: __________________ State: _____ Zip: __________ County: __________

Married: ☐ Yes ☐ No Number of Dependents: ______

Veteran: ☐ Yes ☐ No Months in Services: ______

FAMILY DATA

Name (parent/guardian): ________________________________

Occupation (parent/guardian): ________________________________

Brothers: ___ Older ___ Younger Sisters: ___ Older ___ Younger

EDUCATIONAL DATA

High School: ____________________________________________

Graduation Date: __________________________ Grade Point Average: __________

College/University You plan to Attend: __________________________________________

Accepted ☐ Yes ☐ No

Proposed Major: __________________________________________

Accepted ☐ Yes ☐ No

Are you currently attending a College/University: ☐ Yes ☐ No Grade Point Average: _____

College/University: __________________________________________

Major: __________________________________________

Semester/Term Completed: __________________ Graduation Date __________

(Educational Data Continued On Next Page)
Have you been enrolled in a College/University previous to this:  [ ] Yes  [ ] No

College/University: ________________________________________________________________
Major: ____________________________
Years Attended: _______________ Graduation Date or Reason for Leaving: _______________

EMPLOYMENT STATUS AND HISTORY

Employer: ________________________________________________________________
Employment Length: _______________ Type of Employment: ___________________________
What is your current position with the business: ________________________________
Responsibilities: _____________________________________________________________

Employer: ________________________________________________________________
Employment Length: _______________ Type of Employment: ___________________________
What is your current position with the business: ________________________________
Responsibilities: _____________________________________________________________

Employer: ________________________________________________________________
Employment Length: _______________ Type of Employment: ___________________________
What is your current position with the business: ________________________________
Responsibilities: _____________________________________________________________
LEADERSHIP ACTIVITIES

Organizations/Activities in which you have participated

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CAREER PLANS

Are you willing to work as an intern for a MABA member?  ☐ Yes  ☐ No

If so, who do you want to work for, where, and in what capacity?

______________________________________________________________

______________________________________________________________

______________________________________________________________

What do you currently plan to do after graduation?

______________________________________________________________

______________________________________________________________

______________________________________________________________

ADDRESS FOR MAILING

______________________________________________________________

______________________________________________________________

______________________________________________________________
PERSONAL RECOMMENDATION

Recommendations should include information to verify and substantiate the applicants intent to enter the agri-business industry; character, integrity, and attitude toward agri-business; and qualifications for the scholarship award. It is suggested that persons selected for recommendations not be a member of your immediate family. Neighbors, counselors, teachers, and agri-business persons who know you are possible sources.

Two (2) Letters of Recommendation are required, with at least one (1) of the letters from a member of the Michigan Agri-Business Association, both should be submitted with the completed application.

______________________________

NAMES OF PERSONS SUBMITTING RECOMMENDATIONS

Name/Title/Company/Address:

1. ____________________________________________

2. ____________________________________________

Signature of Applicant: __________________________ Date: ______________

Email Address: ______________________________________