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 is 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 or email to:

Scholarship
Michigan Agri-Business Association
2500 Kerry St. Suite 102
Lansing, MI 48912
Email: maba@miagbiz.org
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: ___________________________________