

# Department of Agricultural, Food, and Resource Economics

## Undergraduate Agribusiness Management Scholarship Application

### Eligibility:

MUST be a current Agribusiness Management major (not minor)

MUST be in good academic standing (2.0 or higher GPA)

MUST be a domestic student

MUST not graduate before Fall semester 2019

MUST be making progress towards this degree and plan to complete this degree program

**Directions:** Please complete application and attach the following:

a one-page, typewritten (double-spaced) statement of your professional goals

a one-page current resume

The deadline is **Friday, March 1, 2019**

Please submit completed application and attachments to [schuell2@msu.edu](mailto:schuell2@msu.edu)

If you have any questions, please contact Ellen Schueller at 353-4519. ***You will be confidentially notified, regarding the approval or regret of a scholarship through your Electronic Student Academic Folder by Friday, March 22, 2019***

### Student Background

Name \_\_\_\_\_

PID \_\_\_\_\_

Email Address \_\_\_\_\_

Local Address \_\_\_\_\_

Local Phone \_\_\_\_\_

Home Address \_\_\_\_\_

(include County) \_\_\_\_\_

Home Phone \_\_\_\_\_

### ACADEMICS

Major \_\_\_\_\_

Minor (if applicable) \_\_\_\_\_

Expected Date of Graduation \_\_\_\_\_

### TRANSFER CREDITS

Transfer Credit # \_\_\_\_\_

Transfer College \_\_\_\_\_

Check all that  
Apply:

- Do you have experience working with a cooperative?
- Do you have an interest in working for a cooperative?
- Please check here if you or your family is a member of a cooperative.

**SOURCES OF EDUCATIONAL FUNDS FOR CURRENT SCHOOL YEAR**

Tuition Paid            In-State            Out-of-State

*Indicate the percentage of monetary support obtained from each of the sources listed below.  
Percentages should total 100%.*

Parent: \_\_\_\_\_ Relative: \_\_\_\_\_ Spouse: \_\_\_\_\_

Grants: \_\_\_\_\_ Self: \_\_\_\_\_ Other: \_\_\_\_\_

Loans: \_\_\_\_\_ Scholarship: \_\_\_\_\_

Explanation Required:

**EXTRACURRICULAR ACTIVITIES: (Please include dates and offices held if applicable)**

Campus Organization Memberships:

Additional University-Related Activities:

Non-University Activities within the last 3 years:

- I hereby certify that the statements made on this form are, to the best of my knowledge, true, complete, and accurate. I also hereby release the information provided herein to the donors sponsoring departmental scholarships*
- I agree to abide by the University policy on academic integrity. I give permission to the scholarship committee to review my complete academic record.*

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

**REMINDER: submit application and attachments to [schuell2@msu.edu](mailto:schuell2@msu.edu)**

1. A one-page, typewritten (double-spaced) statement of your professional goals
2. A one-page current resume

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