Dear Applicant,

Merrimack County Farm Bureau offers scholarships for post high school education from two different memorial funds: the Trudy Gay Memorial Scholarship and the “Chip” McNamera Memorial Scholarship.

The following guidelines must be met before you may be considered eligible for a scholarship:

1. Applicant or applicant’s immediate family (parents or siblings) must be a member in good standing of Merrimack County Farm Bureau at the time of application, and at the receipt of award. Membership is available at a student level.
2. If a student is attending post-secondary education for the first time, they will receive their award after successful completion of the first semester, documented by a copy of their transcript showing the final grades. The award must be claimed prior to April 30 of the following year.
3. Payment is made to the applicant and not to the school.
4. An award may be made to the same student in successive years if he/she proves to be the worthiest of all applicants.
5. In order to be considered for the “Chip” McNamera Memorial Scholarship, the applicant must be enrolled in an agricultural major or program. Preference will be given to applicants attending the Thompson School of Applied Science at UNH, with an interest in dairy science.

Please make sure ALL the documents in the application are filled out completely. It is your responsibility to give the request for a reference to the person filling it out, and then attach the completed references to your application. In order to be considered, your completed application, including all references, transcript, photo, and essay must be received by May 15, 2024 in the New Hampshire Farm Bureau office. There will be NO exceptions. Applications may be mailed to the above address, or hand delivered to the NHFB office.

The Scholarship Committee will review the applications and present their recommendations to the Board of Directors. A final decision will be made at or before the Merrimack County Farm Bureau Board meeting on the second Thursday of June.

If you have any questions you may contact me by email at merrimackcountyfb@gmail.com.

Thank you for your interest in our scholarships.

Sincerely,
Leandra Pritchard
Secretary/Treasurer
Merrimack County Farm Bureau
For Committee Use Only:
Application Complete/Application ID:_________________  Determination – Amount $____________
References Attached ________________  ☐ Trudy Gay Scholarship Fund
Current Member______________  ☐ Chip McNamera Scholarship Fund

START HERE:
What are you planning to study? ________________________________________________________________
What school/program are you attending? __________________________________________________________
What is the address of the school/program? ________________________________________________________
                                                                                               ______________________________________
When are you planning to attend? _________________________________________________________________
This will be my (first, second, third, fourth year): __________________________________________________
Proposed occupation or profession after college? _____________________________________________________

Applicant’s Statement

I hereby certify that:

1. I am a full-time or part time student as defined by the Office of the Registrar, or similar administrative entity at the educational facility I am attending.
2. I hereby acknowledge the information submitted herewith is true and correct.
3. I have not included my name on the essay portion of my application. (Please use first person only).

Date ___________________  Signature of Applicant __________________________________________________________

Parent/Guardian Statement (not needed if applicant is age 21)

I, ________________________________________, have read the following application in full and hereby state with my knowledge ____________________________________ (Applicants Name) is applying for scholarship grant to further his/her education at________________________________________________________ (College/University/Facility).

Date _________________  Signature of Parent/Guardian ______________________________________________________
I. Personal Information

Name: (First) ______________________ (M) ______ (Last) ______________________________

Home Address: _________________________________________________________________

Town/State/Zip Code: __________________________ Date of Birth: ______________

Phone Number: ___________________________ E-Mail: ____________________________

Father’s Name: ________________________________

Father’s Address: ____________________________ Occupation: __________________

Mother’s Name: ________________________________

Mother’s Address: ____________________________ Occupation: __________________

Guardian’s Name: ________________________________

Guardian’s Address: ____________________________ Occupation ____________________

Please list all children in family living at home or receiving full support from home (including applicant).

Name: ____________________________ School, College or Occupation: ____________________________ Age: __________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

II. Education History

High School Name: ________________________________

Address: ______________________________________

Date of Graduation: ______________

Have you attended any post-secondary education? If yes, please explain, including how many years you have completed, or certificates of completion you have earned.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
TRANSCRIPT: Please attach a copy of your most recent grades either from your high school, or post-secondary education. This can be a copy of an official transcript, or otherwise marked by the school as a completed grade.

EXTRACURRICULAR ACTIVITIES: Please summarize your Church, Extracurricular and/or Community Activities (use additional paper if needed):
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

III. Essay
Please provide a written statement of between 250 and 500 words, explaining why Merrimack County Farm Bureau should consider you for this scholarship and how it would enhance your post-secondary educational experience. Please provide information on your agricultural interest and experience (if applicable).

IV. Photo
Please include a recent picture of yourself for publicity purposes. A digital version of the photo may be requested once the scholarship is awarded.

V. References

FOR FIRST TIME APPLICANTS
Please provide three Character References from people in your community with at least two different occupations. References cannot be from a family member. You will need to make copies of the reference form, and fill them out completely. Give one form to each of the people you have asked to recommend you, and have them return it to you with their letter. These references are to be included with your application. Your application cannot be considered without these three references.

FOR REPEAT APPLICANTS
Please provide two Educational References from faculty or advisors at the facility that you have been attending, who can address your commitment to further study. You will need to make copies of the reference form, and fill them out completely. Give one form to each of the people you have asked to recommend you, and have them return it to you with their letter. These references are to be included with your application. Your application cannot be considered without these two references.
Merrimack County Farm Bureau Scholarship Reference

Reference for (Applicant’s Name): _____________________________________________________________

Relationship to Applicant: __________________________________________________________________

Your Name: ________________________________________________________________________________

Street: ___________________________________________________________________________________

City: ___________________________ State: _____ Zip: _________ Phone: (_____) ____________

Occupation: ______________________________________________________________________________

Please fill out the above information and include this document with your letter of reference. Return them to the applicant so they may be included with their application for a scholarship. The completed application must be received at the above address by May 15, 2024 in order to be considered. Thank you.