

**Midwest Dairy Association**  
Ozarks Division  
Educational Award and Application Information



To the Applicant:

The Ozarks Division of Midwest Dairy Association will be awarding four educational awards of \$500 each. Applicants who qualify include any producer who funds Midwest Dairy Association, the producer's spouse, the producer's children or grandchildren. The producer must have an active dairy operation as of January 1<sup>st</sup> of the year the scholarship will be awarded. The producer must reside in Arkansas, Southern Missouri or Eastern Oklahoma. Please contact us if you need to verify these qualifications.

These awards apply to any college major or degree, and there are no limitations on the length of the program (i.e. one, two or four year program). However, an applicant must be considered a full-time student at an accredited college. These awards will be sent directly to each recipient. Eligibility includes one award per family per year. Any former applicant or scholarship winner can reapply for subsequent years.

Recipients will be selected based on the following criteria and point scale. Please note that 100 total points are available. To be considered for an award, we must receive the following information:

- Typed or printed **Application** (0 points)
- Completed **Newspaper Information Request Form** (0 points)
- Typed or printed **Essay** (25 points)  
Describe career aspirations including what stimulates your interest in this career. Please mention special dairy projects or other accomplishments that are noteworthy but are not mentioned in other parts of the application. Specify involvement in the dairy industry and/or participation in your family farm. Relate any special circumstances regarding need for this award.
- List of **School Leadership Activities & Events** (20 points)  
Involvement in extracurricular activities. Distinguish between high school and college.
- Describe **Other Leadership Activities & Work Experience** (20 points)  
Evidence of leadership ability, initiative, character, and integrity. Describe any work experience that you're involved in or have been involved in.
- Academic performance — **Transcript** (20 points)  
High school and/or college (If you are in college, please submit your high school transcript and your current college transcript.)
- 2-3 REFERENCES** (15 points)  
Select at least two references, but no more than three. Please provide a variety such as teacher, employer, minister, etc. Copy and distribute the form. Completed forms should be sent directly to the Midwest Dairy Association, 2015 Rice St., St. Paul, MN 55113-6814

**Please send your completed application to:** Paula Christensen  
Midwest Dairy Association  
2015 Rice St.  
St. Paul, MN 55113-6814  
800-642-3895

***ALL information must be received by MARCH 31, 2012.*** Recipients will be chosen by May 10, 2012. Thank you for your interest in the Midwest Dairy Association educational award.

# Midwest Dairy Association Educational Award Application



**Legal Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
Last First Middle (Area Code) Number

**Permanent Residence** \_\_\_\_\_ **County** \_\_\_\_\_  
Street Address City State Zip Code

**Date of Birth** \_\_\_\_\_ **Social Security #** \_\_\_\_\_ **Email Address** \_\_\_\_\_

**Parent(s) Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
(If applicable) (Area Code) Number

**Parent(s) Residence** \_\_\_\_\_ **County** \_\_\_\_\_  
Street Address City State Zip Code

**Marketing Co-op/Creamery Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
(Area Code) Number

**Are you a student in:** High School Yes No  
 College Yes No If yes: Expected Major \_\_\_\_\_  
 Minor (if applicable) \_\_\_\_\_  
 # of Years in College Program \_\_\_\_\_  
 # of Completed Credit Hours \_\_\_\_\_  
 Anticipated year of college graduation \_\_\_\_\_

**Name of college where award is to be used** \_\_\_\_\_  
(You must be enrolled full-time or plan to be enrolled full-time)

**Location of College** \_\_\_\_\_  
Street Address City State Zip Code

**Please list previous schools attended, including high school, and their location:**

SCHOOL	CITY, STATE	YEARS ATTENDED

**Please list any other scholarships awarded during the previous year:**

SCHOLARSHIP	TOTAL AMOUNT AWARDED

**On 3 separate pieces of paper:**

- A) **List School Leadership Activities & Events\*\*** (i.e. class officer, music contest, sports team captain, etc.)
- B) **Describe Other Leadership Activities & Work Experience\*\*** (i.e. work for neighbor, community volunteer, job with local business, etc.)  
\*\*Must distinguish between high school & college
- C) **One-Page Essay** (Review cover page for details)

**Student signature** \_\_\_\_\_ **Date** \_\_\_\_\_

# Midwest Dairy Association Educational Award Personal References



PLEASE TYPE OR PRINT. (This form must be received by us on or before **March 1<sup>st</sup>** of the current educational award year.)

You are a reference for: \_\_\_\_\_

Please tell us about this person. Include things like character, reliability, citizenship and leadership. You may include personal stories if you find them applicable. Feel free to attach an additional sheet of paper if you need more room.

Your Name \_\_\_\_\_ Phone # \_\_\_\_\_

Complete Address \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Your Employer and Your Position \_\_\_\_\_

\_\_\_\_\_  
Your Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return this form directly to:** Paula Christensen  
Midwest Dairy Association  
2015 Rice St.  
St. Paul, MN 55113-6814  
800-642-3895

Midwest Dairy Association Educational Award  
Newspaper Information Request



**NEWSPAPER INFORMATION**

Name of Parent(s) \_\_\_\_\_  
*(If applicable)*

Home Town & State \_\_\_\_\_

Name of Spouse \_\_\_\_\_  
*(If applicable)*

Names of Children \_\_\_\_\_  
*(Optional)*

Name and Address of Your Cooperative/Creamery \_\_\_\_\_  
\_\_\_\_\_

Name of Local Newspaper \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

***Optional 2<sup>nd</sup> Newspaper***

Name of Newspaper \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*I give Midwest Dairy Association permission to submit a news release pertaining to above named media or other appropriate publications concerning my involvement in their educational award program.*

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Midwest Dairy Association  
Publicity and Consent Release Form**



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ County: \_\_\_\_\_

1. I give Midwest Dairy Association ("MDA") the irrevocable and unrestricted right to take and use and license others to take and use my name, picture, likeness, photograph, film, videotape, and/or verbal statement in all forms, all media and all manners for any editorial, informational, promotional, fundraising, internet (web site) and/or publicity purposes of MDA. I understand that I may be identified by name, age and/or occupation in connection with the public, private and/or internal use of this material.
2. I grant this consent as a voluntary contribution to MDA and waive any rights I may have in connection with any use of the material, including any right to inspect or approve the finished use and any written copy that may be created in connection with such use. I release MDA, its licensees, agents, successors, and assigns from all liability for claims and demands arising from such use.
3. I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MDA AND ME, AND I HAVE SIGNED OF MY OWN FREE WILL.
4. Please check one\*\* I am of full age \_\_\_\_\_ I am a minor \_\_\_\_\_
5. Signature \_\_\_\_\_ Date \_\_\_\_\_

---

---

\*\* I am the parent or guardian of the above named minor and have the legal authority to sign the above Consent and Release form. I approve the terms of the Consent and Release and waive any rights in the premises.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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