

Mr. & Mrs. C.H. Ginn Agriculture Scholarships



BACKGROUND

Vera Ginn established the Mr. & Mrs. C.H. Ginn Agricultural Scholarship in recognition of the lifetime contribution that her parents made to the agricultural community of Shelby County. Mr. & Mrs. C.H. Ginn were farmers and agricultural enthusiasts, and they operated a well-known feed grain and agriculture supply business in Sidney for many years.

ELIGIBILITY PRE-REQUISTES

1. Possess a definite goal of becoming established in farming or other agricultural related career.
2. Planning to enter a post-secondary educational institution of higher learning in the fall of the year in which application is made.
3. Attending or have graduated from a Shelby County school: Anna, Botkins, Fairlawn, Fort Loramie, Hardin-Houston, Jackson Center, Lehman, Russia, Sidney or Sidney Christian.
4. Completed and submitted the Mr. & Mrs. C.H. Ginn Agricultural Scholarship by February 28 of the application year.

AMOUNT OF SCHOLARSHIP

This is an endowed scholarship, in as much as the interest only from an endowment account will be used to make this annual award. The annual amount of the scholarship will be dependent on the yield of the endowment account. 25% of the scholarship will be awarded to the recipient each year up to four years as long as the recipient remains in college pursuing a career in agriculture. Students planning to complete their education in an ag-related major in fewer than four years may make special arrangements to receive the full scholarship amount by contacting the Foundation,
c/o OSU Extension, at 937-498-7239.

HOW SCHOLARSHIP WILL BE AWARDED

Potential recipients will complete and return the Scholarship form to the Shelby County Extension Office by no later than **February 28** of the application year. The Mr. & Mrs. C.H. Ginn Agricultural Scholarship application forms are available at any time from OSU Extension Shelby County, 810 Fair Road, Sidney, OH 45365.

Mr. & Mrs. C.H. Ginn Agriculture Scholarships



APPLICATION REVIEW AND INTERVIEWS

A selection committee will review the written applications. Candidates will be interviewed at a time and place designated by the selection committee, but before April 1 of the application year. The selection committee will review all eligible application forms, notify candidates to be interviewed, conduct interviews, deliberate, and rank all candidates that are interviewed. The selection committee will notify the top-ranked candidate, and if the candidate accepts the award, arrangements will be made to transfer the funds.

If for some reason the top-ranked candidate does not pursue in that year a post-secondary education or changes goals to a non-agricultural career, the scholarship will be awarded to the first alternate.

SELECTION CRITERIA

In as much as this subjective selection process can be made objective, the application form will consist of four areas: Career Goals (30%), Leadership (20%), Academic History (20%), and Need (30%).

SELECTION COMMITTEE

The selection committee will be composed of at least five members of the Board of Directors of the Shelby County 4-H Foundation, Inc.

SCHEDULE AND DEADLINES

On-Going ~ Mr. & Mrs. C. H. Ginn Agricultural Scholarship applications are available from OSU Extension Shelby County (810 Fair Road, Sidney, OH 45365; Phone: 937-498-7239), or on-line at <http://shelby.osu.edu>.

February 28 ~ Deadline for submitting Mr. & Mrs. C. H. Ginn Agricultural Scholarship applications. Completed applications must be submitted to OSU Extension Shelby County, 810 Fair Road, Sidney, OH 45365; Attn: 4-H Foundation Board

February thru March 31 ~ Selection committee organizes, reviews written applications, arranges interviews of up to five candidates, conducts interviews, and ranks candidates.

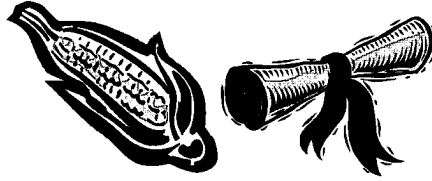
April 15 ~ Scholarship winner is notified.

Fall ~ 25% of the scholarship amount will be issued in the form of a check payable to the recipient and the college/university. Proof of enrollment in ag-related major will be required each summer to ensure that 25% of the funds are released annually for up to four years.

ADMINISTRATION OF SCHOLARSHIP

The Shelby County 4-H Foundation, Inc. Board of Directors will administer the Mr. & Mrs. C. H. Ginn Agricultural Scholarship, and the endowed funds will be a sub-account of the Shelby County 4-H Foundation, Inc.

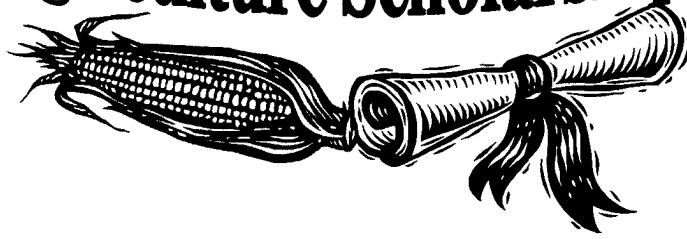
**Mr. & Mrs. C.H. Ginn
Agriculture Scholarship**



ADDITIONAL INFORMATION:

Please be aware that interviews will take place on **Sunday, March 18, 2018, beginning at 1:00 p.m.** This is the only day that we will be interviewing, so please be aware of that when filling out the application.

Mr. & Mrs. C.H. Ginn Agriculture Scholarships



Academic Year: _____ *Date Submitted:* _____

Name in full: _____

Familiar name by which you prefer to be called: _____

Permanent home address _____
(number and street)

(city or town)

(state)

(zip)

Telephone _____ *E-mail* _____

Date of birth: _____ *Parents:* _____

Proposed major field of study: _____

Brief statement concerning career for which you are preparing:

ACADEMIC HISTORY:

1.) *Year in School*

_____ *High School: Year* _____ *If Senior, Date of Graduation*

_____ *Technical/Trade School: Year* _____ *If Senior, Date of Graduation*

2.) *SAT Score:* _____ *ACT Score:* _____

3.) *Name and address of high school, college, or trade school you are now attending:*

Name: _____

Street: _____

Town: _____ *Zip:* _____

4.) *If a high school graduate, name and address of high school attended:*

Name: _____

Street: _____

Town: _____ *Zip:* _____

5.) *Scholastic average:* _____ *out of:* _____ *points.*
Ranked _____ *in class of:* _____

6.) *College, university, or trade schools attended beyond the high school level:*

Dates of Credits: _____

Name of Institution: _____

Attendance ~ Earned Scholastic Average: _____

FINANCIAL NEED:

1.) Explain your need for financial assistance to continue your college education during next year and describe your plans for meeting this financial need. Include your plans for self-support and aid from your family. Mention any special or unusual financial need.

2.) List anticipated college costs for the next year:

Tuition Fees \$ _____ Board \$ _____

Lab Fees \$ _____ Personal Expenses \$ _____

Room \$ _____ Books \$ _____

Clothing \$ _____ Transportation \$ _____

Other \$ _____

3.) Will you have any brothers or sisters attending college or trade school during the next year?

Yes _____ No _____ If yes, explain: _____

4.) Have you been chosen or are you being considered for any other scholarships for the coming Fall Term?

Yes _____ No _____

Name of Scholarship: _____
Amount \$ _____

| | |
|-----------------------------|--|
| <i>Being Considered For</i> | |
| <i>Have Been Chosen</i> | |

Name of Scholarship: _____
Amount \$ _____

| | |
|-----------------------------|--|
| <i>Being Considered For</i> | |
| <i>Have Been Chosen</i> | |

Name of Scholarship: _____
Amount \$ _____

| | |
|-----------------------------|--|
| <i>Being Considered For</i> | |
| <i>Have Been Chosen</i> | |

5.) Will you be receiving or have you applied for any educational loans for next year?

Yes _____ No _____

Loan Institution Name _____ Amount \$ _____

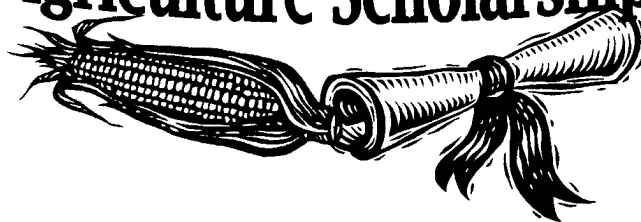
_____ Have Applied or _____ Will Receive

6.) Combined adjusted gross income level of parents (optional):

below \$ 5,000 _____ \$ 5,000-\$10,000 _____ \$10,000-\$15,000 _____
\$15,000-\$20,000 _____ \$20,000-\$25,000 _____ \$25,000-\$30,000 _____
\$30,000-\$35,000 _____ \$35,000 and above _____

7.) Amount of Support you expect to receive from your family next year:
\$ _____

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APPLICANT'S CERTIFICATION

If I receive a Mr. and Mrs. C.H. GINN AGRICULTURAL SCHOLARSHIP AWARD, I agree:

- 1. To maintain a high level of scholarship and behavior.***
- 2. To submit on time the periodic grade reports required by the selection committee.***
- 3. To inform the Selection Committee of any change in my course of study withdrawal from college, etc.***

I understand that my scholarship may be revoked:

- 1. If I fail to discharge any of the obligations agreed to above.***
- 2. If I am unable to secure admission to an approved institution, or if I withdraw from such institution or my course of study prior to the expiration of the term of my scholarship.***

I am not the dependent, child, stepchild, grandchild, brother, sister, niece, nephew, or spouse of any member of the Selection Committee.

I understand THE SHELBY COUNTY 4-H FOUNDATION, INC. assumes no responsibility of obligation whatsoever beyond providing the amount of the scholarship award.

I have examined this Application and certify that all information given in it is complete and accurate to the best of my knowledge. I have attached all required documents.

(Signature of Applicant)

(Date)