



2018
ESSEX AGRICULTURAL SOCIETY
SCHOLARSHIP APPLICATION

Name: Telephone:

Address:

(Town) (State) (Zip Code)

Email:

A. High School(s) attended in last three (3) years:

School Date:
School Date:
School Date:

B. Name of school or college for which you request scholarship:

C. Father or Guardian:

Address:
(Town) (State) (Zip Code)

D. Mother or Guardian:

Address:
(Town) (State) (Zip Code)

E. Please attach sheet explaining why you believe you are a good candidate for this scholarship.

F. Have you or your parents been involved with Topsfield Fair as a worker, a volunteer, or an exhibitor? Which Department? Number of Years? Please explain type of involvement:

G. Are you or a family member affiliated with the Essex County Farm Bureau?

H. Are you or a family member affiliated with the Essex County Fruit Growers Association?



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**I. References:**

**Academic:** Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

**Employment:** Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

**Personal:** Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_

**Please enclose your high school transcripts (including GPA and class standing) along an up-to-date resume. Well-rounded students are encouraged to apply.**

\*\*\*\*\*

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*

**PARENT'S CERTIFICATION:**

**We have checked this application for omissions and errors. To the best of my knowledge, the information reported on this application is complete and correct.**

**Parent's or Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Relationship to student:** \_\_\_\_\_

\*\*\*\*\*

**Prior to April 1<sup>st</sup>, please email to: [joy@topsfieldfair.org](mailto:joy@topsfieldfair.org) or postal mail to: James O'Brien, Topsfield Fair, P. O. Box 134, Topsfield, MA 01983**