## CRITERIA FOR QUALIFICATION FOR OLIVER HAGG MEMORIAL SCHOLARSHIP

Applicant must be a current resident of Saline County.

Applicant must be a spring graduating senior entering college or vocational school in the fall.

Applicant must be majoring in the Agricultural field.

Three letters of recommendation must accompany the scholarship application. (suggestions for letter: school counselor or teacher, civic leader, 4-H club leader/project leader)

Applicant must have at least a 3.0 grade point average.

Scholarship money will be sent directly to school of choice.

Applicant must complete Oliver Hagg Memorial Scholarship application.

Scholarship can be renewed for 3 additional years by maintaining 3.0 grade point average, providing transcript and continuing in Agricultural field.

Scholarship application due in Saline County Livestock and Expo Center Office, 900 Greeley, Salina, KS 67401 by March 6, 2023.

## \$1,000 OLIVER HAGG MEMORIAL SCHOLARSHIP APPLICATION Administered by Saline County, Kansas

## INSTRUCTIONS:

Each application consists of this form plus the following: (ALL ITEMS MUST BE ATTACHED TO APPLICATION)

- 1. Transcript of high school grades. If home schooled, indicate such and provide appropriate documentation
- 2. One letter of recommendation from school personnel.
- 3. One letter of recommendation from civic leader or minister.
- 4. One additional letter of recommendation.
- 5. One page summarizing your leadership, listing any awards and honors you have received, your extra-curricular activities including school, church and community.
- 6. One page stating your interest in the field of Agriculture and what you plan to do after completing college or vocational school and why you should be considered for this \$1,000 scholarship, including financial need.

Staple this form and the required attachments in the upper left-hand corner; return your completed application and attachments to Saline County Livestock & Expo Center, 900 Greeley, Salina, KS 67401. Complete all blanks on this form as requested or use "NA"

DATE:			
NAME:			
First	Middle	Last	
HOME ADDRESS			
Street, Box		City/State/Zip	
HOME TELEPHONE		EMAIL ADDRESS	
PARENT'S OR GUARDIAN'	S NAMES:		
ADDRESS:			
DATE OF HIGH SCHOOL GI	RADUATION:		
Name of College or Vocationa	al School & address		
Intended College Major			
High School GPA	out of po	ints. ACT/SAT Composite Score	
Career Goal:	11		
I have personally prepared this	application and believe it to	be correct.	
Signature of Applicant		Date:	
Received in Expo Ce	nter Office		