

Carlos Ortiz Agricultural Commissioner Sealer of Weights and Measures

. Folene Dessert

Asst. Agricultural Commissioner Asst. Sealer of Weights and Measures

Imperial County Board of Supervisors Agricultural Benefit Program Scholarship Match

Student Recipients of Agriculture Scholarships

The Imperial County Agricultural Benefit Scholarship Program matches qualifying scholarships awarded to Imperial County students in an amount not to exceed \$3,000 per student per academic year with a total amount not to exceed \$75,000. To be a "Qualifying Scholarship," the scholarship requirements must be exclusively for agriculture majors and/or those in closely-related fields. Imperial County does not accept or review applications for scholarships, but instead works exclusively with organizations that manage qualifying scholarship programs.

To receive the County match for a qualifying scholarship, the student must ensure that:

- The form on the back of this page is submitted to the Imperial County Agricultural Commissioner's Office by June 15;
- Any information not available when the form is first submitted will be provided to the Agricultural Commissioner's Office as soon as possible thereafter (such as Student I.D. number); and
- Scholarship match recipients will have an awards ceremony after the scholarships are awarded. More details to follow.

You may be notified in writing of any additional required information that has not been received and if your scholarship meets the criteria for this match.

If you cannot submit this form by June 15, please contact us.

Contact Information:

Agricultural Commissioner's Office Phone (442) 265-1500 852 Broadway, El Centro, CA 92243 Fax (760) 353-9420

Ana Gomez, Agricultural Biologist II analgomez@co.imperial.ca.us nicolasberg@co.imperial.ca.us Nicolas Berg, Agricultural Biologist IV Margo Sanchez, Deputy Agricultural Commissioner margosanchez@co.imperial.ca.us

Imperial County Board of Supervisors

Agricultural Benefit Program Scholarship Match

Student Information Form

Applicant Information	on (Please fill out this sect	tion completely.)			
Full Name:			Date of Birth:		
Present Address:					
	City		State	Zip	
Permanent Address	(if different):				
	City		State	Zip	
Phone Numbers:	Cell		Hom	ne	
Email:					
and requirements for eva	e a "Qualifying Scholarship' aluation.)	"; the awarding organization s			
Name of Scholarship	o(s):				
	yet available, leave it blar	nk. However, it must be provi			
Major:					
Student ID Number:	_				
Remit Payment to (a	t University):				
Payment Address: _					
	The information o	n this application is corre	ect to the bo	est of my knowledge	2.
Applicant Signature			 Date	2	