



DON ARON SCHOLARSHIP FUND APPLICATION

Name of Applicant:

Mailing Address:

City, State, Zip Code:

Phone:

E-mail Address:

District Employee:

Family Member:

Relationship (if family member):

Name of Conservation District:

District Mailing Address:

City, State, Zip Code:

District Phone:

College or University:

College Major:

List Positions of Leadership and/or Participation in (4-H, FFA, Student and/or Professional Organizations, etc.):

Amount Requested: \$ _____ (not to exceed \$1,000)

Signature of Applicant: _____ **Date:** _____

Please attach the following and submit to executivedirector@ncdea.org by March 15, 2024:

- A brief course description and explanation of how it will benefit you professionally and/or personally (1 page only)
- Information substantiating enrollment at an accredited college or university
- The most recent high school or college/university transcript
- Statement of financial need and other scholarships awarded
- Letters of recommendation