

SEDGWICK COUNTY FARM BUREAU AGRICULTURAL ASSOCIATION -AMBASSADOR PROGRAM APPLICATION FOR JUNIORS-

(PLEASE <u>PRINT</u> IN INK OR TYPE. APPLICATION MUST BE IN FARM BUREAU OFFICE BY MARCH 15, 2023.)

Date:	(MM/DD/YYYY)		
Kansas Farm Bureau M	lembership Number:		(Nine-digit number beginning with 150)
Name:			
L	ast, First, Middle		
Home Address:			
Date of Graduation:	Street, City,	State, Zip Code Current GPA: _	
Telephone Number:			
E-Mail Address:			
Father's Name:			
Mother's Name:			
· ·	ership in organizations, offices onors or awards. Less than or		thletic activities, participation in debate or
•	,		I in since entering high school, such as in each. Less than or equal to 500 words

List summer or part-time work experience. Please list the time you worked and duties. Less than or equal to 500 words.
Please summarize why you would like to be a Sedgwick County Farm Bureau Ag Ambassador. Less than or equal to 500 words.
Write a summary of your understanding of Kansas Farm Bureau and Sedgwick County Farm Bureau. Less than or equal to 500 words.

$\textbf{PLEASE INCLUDE WITH THIS APPLICATION: } \underline{\textbf{TWO LETTERS OF RECOMMENDATION}} \text{ of ability and } \\$

character from an employer, counselor, pastor, teacher or adult friend.

APPLICATION MUST BE IN FARM BUREAU OFFICE BY MARCH 15, 2023.

Please Submit to: sedgwickfb@kfb.org

Or mail to: Sedgwick County Farm Bureau Agricultural Association

Scholarship Committee 889 N Maize Rd, Suite 100

Wichita, KS 67212