



## 2025 ALCIVIA SCHOLARSHIP APPLICATION

ALCIVIA is pleased to announce that we will be offering \$1,000 ALCIVIA Scholarships to a total of 25 area students. The scholarships will be awarded in two categories:

1. **College Students:** This is open to students attending an accredited four-year university or college, an accredited two-year technical school program or an accredited agricultural short course.
2. **High School Seniors:** This is open to high school seniors who will be attending one of the above listed higher education programs following high school graduation.

### ELIGIBILITY:

- 1) All active members for the 2024 fiscal year (9/1/2023 - 8/31/2024) of ALCIVIA and their children are eligible to receive an ALCIVIA Scholarship, including employees and directors. Grandchildren of members are not allowed to apply if their parents are not members/employees of the cooperative.
- 2) Applicants can only receive the scholarship once.
- 3) Applicants must have a minimum cumulative grade point average of 2.75 on a 4.0 scale during their previous educational year.
- 4) Applicants will be judged on leadership, scholastic achievement, extra-curricular activities, personal motivation, academic and life goals.
- 5) Preference will be given to students majoring in agriculture.
- 6) To be eligible, all areas of the scholarship application form must be filled out and submitted together.
- 7) Attach transcripts through your most recently completed semester and a copy of your Fall 2024 course schedule to your application.
- 8) Scholarship recipients will be notified via email listed on application by March 15, 2025.
- 9) All applications are due at the ALCIVIA office (1401 Landmark Dr, Cottage Grove) by January 31, 2025.

PLEASE MAKE SURE TO RETURN THE FOLLOWING DOCUMENTS TOGETHER BY JANUARY 31, 2025:

- Completed application
- Transcripts
- Letters of Recommendation (3)
- Fall 2024 class schedule
- Photo to be used for marketing purposes if awarded scholarship

**\*\*APPLICATIONS RECEIVED AFTER JANUARY 31, 2025 WILL NOT BE CONSIDERED.**

**Submit via mail to:**

ALCIVIA  
ALCIVIA Scholarship Committee  
1401 Landmark Drive  
Cottage Grove, WI 53527

**Or email to:**

scholarship@ALCIVIA.com

*Please type or print in the form below.*

**APPLICATIONS ARE ACCEPTED VIA MAIL OR EMAIL.**



# 2025 ALCIVIA SCHOLARSHIP APPLICATION

## I. PERSONAL INFORMATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Parent(s) or Guardian: \_\_\_\_\_ ALCIVIA Account Number(s): \_\_\_\_\_

Hometown Newspaper: \_\_\_\_\_

## II. HIGH SCHOOL INFORMATION

*Please attach most recent transcripts, if applying as a high school senior*

School Name: \_\_\_\_\_ GPA (based on a 4.0 scale): \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

High School Graduation Year: \_\_\_\_\_

## III. POST SECONDARY EDUCATION

*Please attach all transcripts and Fall 2023 class schedule.*

College, University or Technical/Short Course College you are enrolled at, or will be enrolling in after your senior year of high school:

Name: \_\_\_\_\_ GPA: (based on 4.0 scale) \_\_\_\_\_

Please omit GPA if applying as a high school senior

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

Intended career upon graduation: \_\_\_\_\_

## IV. DEMONSTRATION OF LEADERSHIP, SCHOLASTIC ACHIEVEMENT, ACTIVITIES AND GOALS

*Please attach additional pages as needed to complete this area.*

1. List (in order of importance to you) extracurricular and community activities in which you have participated.

2. List honors and awards (not scholarships) you have received.

3. List scholarships you have or will receive. Indicate the name, agency granting it, and amount.

4. Please provide a brief personal statement that covers significant events in your life, your educational goals, your future career plans, and how the ALCIVIA scholarship will help you achieve these goals. *Attach a separate sheet if necessary.*

#### **V. LETTERS OF RECOMMENDATION**

Please submit three letters of recommendation in support of your application. In addition, please list their name, occupation, and phone number below. The completed letters of reference **MUST** be submitted with this application. The applicant should include letters of reference with the application packet.

Please direct questions to **scholarship@ALCIVIA.com**.

1. Name \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

***By signing below, I acknowledge the above information to be true and accurate.***

Signature \_\_\_\_\_ Date \_\_\_\_\_