

FARMERS MUTUAL INSURANCE COMPANY

SCHOLARSHIP APPLICATION

Name _____

Please print or type

Date of Birth _____

Street Address _____

SSN _____

City/State/Zip _____

Telephone _____

Minnesota High School / Post-Secondary School

Currently Attending: _____

A certified copy of my high school/post-secondary transcript **MUST** be enclosed.

What post-secondary school do you plan to attend? _____

Have you been accepted for admission into this school? Yes No

If Not, please indicate reason: _____

ESSAY: On a separate sheet of paper, please address the following topics in 150 words or less.

Describe your involvement in school and community activities and what impact they have had. What are your plans for the future?

Parents Name _____

Parents address _____

Agents Name _____ Policy Number _____

Please read carefully before signing: "I am applying for the Farmers Mutual Education Scholarship. I have read and understand the application criteria. I hereby certify that all the information provided by me on this application is true and accurate to the best of my knowledge. I understand that Farmers Mutual officials may verify information provided by me."

Applicants Signature _____

Date _____

Parent Signature _____

Date _____

Farmers Mutual Insurance Company

Education Scholarship

Farmers Mutual is offering an educational scholarship to be presented to a Minnesota high school graduating senior or post-secondary student. Those who qualify must be a resident of Minnesota and the son or daughter of a policyholder of Farmers Mutual Insurance Company.

The recipient of the Farmers Mutual Education Scholarship will be selected by blind assessment. The scholarship award will be paid jointly to the educational institution and the recipient prior to the start of the second semester.

All applications must be submitted to your family's insurance agent, who represents Farmers Mutual Insurance Company, or to the Farmers Mutual home office at 25380 State Hwy 13, Manchester MN 56007.

To be eligible to apply for the scholarship:

1. Applicants must be the son or daughter of a policyholder of Farmers Mutual Insurance Company
2. Applicant must be attending a post-secondary education program (college, vocational school or community college).
3. Applicant must have an accumulative 3.0 Grade Point average. Enclose a certified copy of your high school or post-secondary transcript.
4. Applicant must be graduating from a Minnesota high school or currently enrolled in a post-secondary program.
5. Applicant must be a resident of Minnesota.
6. Applicant must submit a written essay on a topic chosen by the scholarship selection committee.
7. All applications must be postmarked on or before April 1 in the year of issue to qualify.

Selection Guidelines.

- Members of the Scholarship Selection Committee will review all applications to insure eligibility as an applicant.
- The recipient(s) will be selected by blind assessment from all qualifying applications.
- Scholarship recipients will be notified via mail by May 1.

Distribution Guidelines.

- \$500 scholarships will be awarded each year.
- The scholarship award will be paid jointly to the educational institution and the recipient following the completion of the first semester and prior to the start of the second semester.

Completed applications should be mailed to:

Farmers Mutual Insurance Company
25380 State Hwy 13
Manchester MN 56007
e-mail: general@manchestermutual.com
Phone: (507)826-3425
Fax: (507)826-3447