

PART I. GENERAL INFORMATION (Please PRINT)

Full name _____ Preferred name _____
First Middle Initial Last

Home address _____ City _____ State _____ Zip _____

Home phone (_____) _____ Mobile phone (_____) _____

County _____ Preferred Email _____ Birthdate (mo/day/yr) ____/____/____ Gender: Male Female

Employer _____ Employer's address _____

City _____ State _____ Zip _____ Work phone (_____) _____

Work fax (_____) _____ Work email _____

_____ % farm income / _____ % off farm income If self-nominating: I am a member of _____ County Farm Bureau

Sponsoring/Nominating group

Name _____ Phone(_____) _____ Email _____

Please describe your off farm employment

Please describe your connection to agriculture

Please list your community activities and achievements

Please indicate how you plan to pay for the program's tuition. (Note: All tuition must be paid by the first session in June.)

_____ I am applying for a \$4,000 OFBF Scholarship. _____ I will pay the full tuition myself.
 Applicant will be responsible for \$500 of tuition.

_____ I am being sponsored by another organization; it has agreed to pay the tuition. Organization and Email _____

_____ The tuition will be shared by myself and another organization/company. Organization/Company and Email _____

Amount of tuition that is applicant responsibility \$_____ / Amount of tuition cost that the organization's responsibility \$_____

PART II. RESPONSE TO ESSAY QUESTIONS (Responses may be attached on a separate piece of paper.)

Describe, in your own words, what a leader is and how are you a leader?

Why do you want to participate in AgriPOWER and what will you bring to the AgriPOWER Class XII?

PART II. ESSAY CONTINUED

How do you see yourself applying the knowledge and skills you gain from participating in AgriPOWER?

List one major issue facing agriculture and describe how you would attempt to resolve it.

PART III. REFERENCES

You must submit two letters of recommendation. The individuals you select as a reference should address your leadership potential. No family members, please. List the two individuals that supplied your reference letters:

_____	_____
<i>First and Last Name</i>	<i>Relationship</i>
_____	_____
<i>First and Last Name</i>	<i>Relationship</i>

References may send their letter of recommendation directly to OFBF at the address listed below, or you may attach the letters of recommendation to your application.

PART IV. COMMITMENT TO PARTICIPATE/APPROVALS

The AgriPOWER program will consist of seven institutes held during the months of June, July, August, September, November, January and February. The seminars will include meals and evening programs; it is anticipated that most institutes will begin at 9 a.m. on the first day of the program and adjourn with lunch on the final day. Participants are expected to attend all institutes. To graduate, participants may have no more than one excused absence. Attendance at the first and last institutes is mandatory. Spouses may not participate in the same class. Must not be a full time college student.

I understand the requirements of the AgriPOWER Institute. I am willing to pay a \$400 participation deposit in addition to AgriPOWER tuition fees. I hereby pledge to devote the time to complete the program, and participate and volunteer in leadership activities after the seminar year. I have discussed the requirements of this program with my spouse (if applicable) and employer (if applicable). Their support is indicated below.

_____	_____
Candidate's Signature	Date

SPOUSAL CONSENT (if applicable)

I have discussed my spouse's participation in the program and understand the level of commitment. I support his/her decision to participate.

_____	_____
Spouse's Signature	Date

EMPLOYER'S CONSENT (if applicable)

I have reviewed the time commitments for this program and agree to support my employee's participation in AgriPOWER. We have come to an agreement on how time away from work to participate will be handled.

_____	_____	_____	_____
Employer's Signature	Employer Name (PRINT)	Title/Position	Date

APPLICATIONS MUST BE POSTMARKED OR E-MAILED BY APRIL 20, 2020, and mailed to the following address:

AgriPOWER Institute / Melinda Witten
 c/o Ohio Farm Bureau Federation
 P. O. Box 182383
 Columbus, Ohio 43218-2383



AGRIPOWER