



P: 604.854.4454
 TF: 866.522.3447
 F: 604.854.4485

Unit 1 – 2650 Progressive Way
 Abbotsford, BC V2T 6H9

CHECKLIST OF REQUIRED DOCUMENTS

Please enclose the following documents with your submission:

- Letter of recommendation from a non-family member (e.g., teacher, employer, community leader) who can speak to both:
 - Your involvement in the agriculture sector, and
 - Your personal character and integrity.
- Proof of B.C. residence (e.g., government ID, employer issued document, school enrollment or transcript showing address, etc.).
- Proof of Canadian citizenship or permanent residence.
- Proof of enrollment (e.g., enrollment verification letter, official acceptance letter, etc.).
- Copy of most recent academic record (e.g., official transcript).
- Completed application form, including evaluation criteria (either written or video response).

APPLICANT INFORMATION

First & Last Name:	
Date of Birth:	
Address:	
Email:	
Phone:	
Are you a member of a BCAC member association?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Note: will require verification.</i>

<p>If so, please indicate from the list:</p>	<p>Select any that apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> BC Blueberry Council <input type="checkbox"/> BC Broiler Hatching Egg Producers' Association <input type="checkbox"/> BC Cattlemen's Association <input type="checkbox"/> BC Cherry Association <input type="checkbox"/> BC Chicken Growers' Association <input type="checkbox"/> BC Cranberry Growers' Association <input type="checkbox"/> BC Dairy Association <input type="checkbox"/> BC Egg Producers' Association <input type="checkbox"/> BC Fruit Growers' Association <input type="checkbox"/> BC Grain Producers' Association <input type="checkbox"/> BC Grapegrowers' Association <input type="checkbox"/> BC Greenhouse Growers' Association <input type="checkbox"/> BC Hazelnut Growers Association <input type="checkbox"/> BC Honey Producers' Association <input type="checkbox"/> BC Landscape & Nursery Association <input type="checkbox"/> BC Pork Producers' Association <input type="checkbox"/> BC Potato & Vegetable Growers' Association <input type="checkbox"/> BC Salmon Farmers Association <input type="checkbox"/> BC Shellfish Growers Association <input type="checkbox"/> BC Strawberry Growers Association <input type="checkbox"/> BC Turkey Association <input type="checkbox"/> BC Wine Grape Council <input type="checkbox"/> Fraser Valley Pea and Bush Bean Growers' Association <input type="checkbox"/> Horse Council British Columbia <input type="checkbox"/> Organic BC <input type="checkbox"/> Peace Region Forage Seed Association <input type="checkbox"/> Raspberry Industry Development Council <input type="checkbox"/> United Flower Growers' Co-Op
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SCHOOLING INFORMATION

<p>Canadian Post-Secondary Institution Enrolled In:</p>	
<p>Program Name:</p>	
<p>Expected Graduation Year:</p>	

RESPONSE FORMAT

You may submit your response to the questions below in either written (max 300 words per question) or video format (max 5 minutes in length). The format you choose will not affect the selection process. Regardless of the format, **please make sure all requested information is included and clearly presented.**

EVALUATION CRITERIA:

1. Tell us about your experience in the agriculture sector (include how you have had an active role e.g., 4-H member, raised on a farm, work experience, etc.)
2. Describe your career goals and objectives, outline any plans you have made to achieve them.
3. How does your completion of this program benefit the agriculture sector? (e.g., how might your career goals address current sector challenges in B.C. or across Canada).

NOTIFICATION OF WINNER AND FURTHER REQUIREMENTS

The scholarship recipient will be selected and notified no later than **April 30th**, annually. They must provide proof of enrolment from their post-secondary institution. Intake can be any time of year depending on the program enrolled in.

The selected recipient will have their name and photo published in BC Agriculture Council communications and be invited to the BC Agriculture Forum for an official presentation.

Please sign to acknowledge you understand the terms and requirements of this scholarship program:

Name

Signature

Date