

OMTA 2020-21 Scholarship Program Eligibility and Application Procedures

BASIC ELIGIBILITY REQUIREMENTS:

- The OMTA Scholarship Program is for current members employees and their dependent family members (spouse/child/grandchild).
- The applicant or applicant's sponsor must have <u>at least three (3) consecutive years of membership</u> in the association.
- The applicant must be at least in their second year of study for the fall 2020 semester and must have at least a 3.0 cumulative grade point average (GPA) unweighted on a 4.0 scale.
- All applicants must be students currently working toward an accredited program at an accredited institution or recognized trade school.
- All applicants must submit a complete application package postmarked no later than August 31, 2020. Incomplete or late applications will not be considered.

A COMPLETE APPLICATION PACKAGE SHALL INCLUDE:

- OMTA Scholarship Application Form: A photocopy is acceptable.
- **Essay:** Typed, double-spaced, essay not exceeding two pages on the topic: "The Dairy Industry and Me."
- Written Recommendation/Character Reference: Please submit a written recommendation/character reference from a supervisor, co-worker, community leader, teacher, or counselor.
- **Transcript:** The transcript must show a GPA of 3.0 or higher.

Applicants currently enrolled: Submit a transcript that verifies at least a 3.0 from the 2019-2020 school year.

Applicants not currently enrolled: Submit a transcript from the last school attended. **All other applicants:** Submit full post-secondary career transcripts that include spring 2020 grades.

NOTE: If your transcript is being mailed directly by the school, the transcript must be postmarked by the application deadline of August 31, 2020. An official transcript is not required; photocopies of transcripts are acceptable.

- List and Briefly Describe Awards, Extra-curricular and Community Service Activities: Please provide this list on a separate page. Include dates and other relevant information that will help committee members understand your contribution.
- One Self-addressed, Stamped, #10 Business-size Envelope with Appropriate Postage Properly Affixed. This will be used to provide results of the competition. All qualified applicants will be notified by September 30, 2020.

MAILING INFORMATION:

- Place all of the above materials unfolded in the same 9" x 12" (or larger) envelope.
- Please: No Staples, No Paper Clips, No Folding.
- Mail the complete application package to:

OMTA SCHOLARSHIP 301-660 SPEEDVALE AVE. W., GUELPH, ON N1K 1E5

Make sure that your application package is postmarked no later than August 31, 2020.

The OMTA Scholarship Program Award is made possible by the membership contributions at each annual convention golf outing and, in part, by other direct contributions from various members.



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	This Application Form: A photocopy of this form is acceptable.	postmarked by August 31, 2020.	
	Essay: Typed, double-spaced, essay not exceeding two pages on the topic: "The Dairy Industry and Me"	7.4520.0.1, 2.020.	
		n Recommendation/Character Reference: May be from a supervisor/co-work unity leader, teacher or counselor. Must be submitted together with the ution package.	
•	Transcript: Current Second Year Student: Submit a transcript that verifies at least a 3. year. Applicants not currently enrolled: Submit a transcript from the last school All other applicants: Submit full post-secondary career transcripts that income	attended.	
	Check here if transcripts are being mailed separately by the school. transcripts still must be postmarked by August 31, 2020.) An official required; photocopies are acceptable.		
	List and Briefly Describe Awards, Extra-curricular and Community Please provide this list on a separate page. Include relevant dates a spent at activity. Clearly and briefly explain your contributions.		
P	Please do not fold or bind any pages with staples or paper clips. Place all materials unfolded into a 9" x 12" (or larger) envelope postmarked by Aug	ust 31, 2020.	
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•	OMTA SCHOLARSHIP		
	301-660 SPEEDVALE AVE. W., GUELPH, ON N1K 1E5		
	pplicant's Name:		
	Complete Home Address:		
	City, Province, Postal Code:		
-	lome Phone #: ()Email:		
S	Sponsor's Name:		
	Relationship to Applicant: \square Father \square Mother \square Spouse \square Self \square Grandpaspecify)	rent 🗆 Other	
S	ponsor Company Name:		
S	Sponsor's Phone #: ()Member since:		
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