



The Naturipe Berry Growers (NBG) Scholarship Award Program was organized to give financial aid to students with a desire to further their educational career goals and pursue a career in the agricultural industry. Scholarships are awarded annually to the children of our grower's farm workers in each major strawberry growing region of California (Watsonville, Salinas, Santa Maria, and Oxnard).

Who is Eligible?

Children of strawberry farm workers who are currently working for a NBG.

Students must graduate from high school and be a resident of CA.

Growers and their families, officers of NBG or NBG Board of Directors and their families are not eligible.

Requirements:

Applications are accepted each year and must be accompanied by the following applicable items:

- 1) Two letters of recommendation dated within the last three months
- 2) Parents employment verification
- 3) Application, filled out completely, signed and dated
- 4) Must be a resident of CA
- 5) High School Diploma
- 6) Proof of college enrollment

Awards:

The following scholarships will be available each year:

1. One \$1,500 award for each of our growing regions: Watsonville, Salinas, Santa Maria, and Oxnard.
2. One \$3,000 award will be given to an agricultural major at a 4-year college

To Apply:

Go to: www.naturipeberrygrowers.com



BERRY GROWERS INC.

Naturipe Berry Growers' Scholarship Award Program

Student's Personal Information:

Name _____
Last First Middle

Permanent mailing address: _____
PO Box/Street City/State Zip

Phone numbers: _____
Home Cell

E-mail: _____

Date of Birth: _____
Month/day/year

College/Highschool: _____

Address: _____

Date of Graduation: _____

Guidance Counselors Name: _____ Phone: _____

Intended College/University where you will be attending: _____

Extracurricular/Volunteer Activities: _____

Educational Goals: *(Please feel free to use a seperate sheet of paper)*



Naturipe Berry Growers' Scholarship Award Program

Parent Employer Information

Parent's name _____

Address _____
 PO Box/Street City/State Zip

Parent's employer _____

Employer's address _____

Phone _____ E-mail _____

The attached Employment Verification form needs to be completed by your parent and their employer.



Naturipe Berry Growers' Scholarship Award Program

Parent Employment Verification

Your earliest response is appreciated.

The son or daughter of the individual below is being considered for a scholarship from Naturipe Berry Growers. Your prompt response is appreciated. Thank you in advance for your cooperation. All information is kept confidential.

Student name _____

Section 1: To be completed by parent of scholarship applicant

I authorize the Naturipe Berry Growers to obtain employment verification information as requested below, and I release all such parties from all liability for any damage that may result from furnishing such information.

Name _____ Signature _____

Date _____ Social security number _____

Employer _____

Employer phone _____ Employer fax _____

Section 2: To be completed by employer

Is this applicant currently employed? Yes No

If no, is the applicant currently laid off? Yes No

If yes, when will the applicant be called back to work? _____

Employment history for the past two years

Employment Dates for: From ____ / ____ / ____ To ____ / ____ / ____

From ____ / ____ / ____ To ____ / ____ / ____

Job title/duties: _____

Completed by (print name) _____ Date _____

Signature _____ Phone _____

Title _____ Company _____