

2021

Cooperative Council of  
North Carolina

Jim Graham Cooperative  
Leadership Scholarship



COOPERATIVE  
COUNCIL *of* NC


### [SCHOLARSHIP APPLICATION]

On behalf of the CCNC we hope your school year is going well and are looking forward to graduation in the coming Spring! Because you attended the Cooperative Leadership Camp at some point during High School, you are eligible to apply for \$1000 college scholarship. Please go online to fill out the entire application and submit by the due date. The winner will be honored at the Council's annual meeting in March.



#### **Jim Graham:**

North Carolina's  
Renowned Agricultural  
leader, active supporter of the  
Cooperative Leadership Camp  
and a former NC Agriculture  
Commissioner





**Recommendation Form**

**Letter of recommendation form to be given to school counselor, teacher or principal.**

Please use this form (or mail us a letter) to recommend student for the Jim Graham Scholarship from the Cooperative Council of NC.

**Student's Name:** \_\_\_\_\_

**Recommender Name:** \_\_\_\_\_

**Recommender Email Address:** \_\_\_\_\_

**Recommender Phone Number:** \_\_\_\_\_

Please describe why you are recommending the student above receive a scholarship for higher education:

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Please describe a personal example of why you think this student should be chosen for the Jim Graham Scholarship:

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Printed name of Recommender: \_\_\_\_\_

Signature of Recommender: \_\_\_\_\_

Date: \_\_\_\_\_

**Mail this form and any supporting documents by Feb. 20th:**

**Cooperative Council of North Carolina**

**PO Box 10426**

**Raleigh, NC 27605**



**Cooperative Council of North Carolina  
P.O. Box 10426  
Raleigh, North Carolina 27605  
919-834-5544**

### **NORTH CAROLINA COOPERATIVE YOUTH LEADERSHIP SCHOLARSHIP**

The Cooperative Council of North Carolina will award one scholarship of \$1,000 to a participant in the Cooperative Leadership Camp. Any high school senior who has attended this camp at some point while in high school is eligible to submit the scholarship application.

#### **Eligibility Requirements**

- Must have attended the full week of the Cooperative Leadership Camp
- Must be a current high school senior graduating this year
- Must be enrolled or be planning to enroll as a full-time student to an accredited two or four-year College or university, public or private.

#### **Disbursement of Funds**

Scholarship recipient will be notified in the spring semester, and will be invited to attend a special luncheon at the annual meeting be honored. The recipient must notify the Cooperative Council when they are enrolled as a full-time student in the institution of their choice. Funds will be disbursed directly to the institution by the Cooperative Council after the student has enrolled, to be used towards any educational expenses.

#### **Judging Criteria**

All applicants who are eligible will be considered according to established criteria of essay content, extracurricular activity and letter of recommendation. A scholarship committee will judge the applications according to the established criteria and the application with the highest score will win the scholarship.

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**Jim Graham Scholarship Signature Page**

Name of Scholarship Applicant: \_\_\_\_\_

Letter of Recommendation being sent by: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Contact Phone Number for Recommendation person: \_\_\_\_\_

Contact Email for Recommendation Person: \_\_\_\_\_

**Material Submission check list: I have completed the following information (please check each line):**

- Application submitted online (www.CCNC.coop ) Or request paper application.
- Signed signature page (this page) returned by mail by student
- Student's essay (either online or typed and mailed with signature page.)
- Letter of reference form mailed to CCNC (give form to recommender)

**Certification: (To be signed by scholarship applicant.)**

I have read and understand the enclosed information. I affirm that the information provided on the Jim Graham application and any additional material that I submit related to this scholarship process is complete, accurate and true to the best of my knowledge. I hereby authorize the Cooperative Council of North Carolina to access the scholarship application information provided by me, as well as other official and unofficial information regarding my academic progress and status, for the purpose of providing information concerning my eligibility as a scholarship recipient. I understand that furnishing false information may result in revocation of my scholarship funding, if selected as a recipient. I also understand that if selected as a recipient and I do not meet the requirement of registering as a full-time student to an educational institution, I will not receive the scholarship funds.

Student's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Student Printed Name: \_\_\_\_\_

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