

SC Farm Bureau Federation

Young Farmers & Ranchers Program



AG Internship Access Grant Application Packet

SC Farm Bureau Mission Statement

The mission of SCFB is to promote agricultural interests in the state of South Carolina and to optimize the lives of those involved in agriculture in South Carolina, while being respectful to the needs and concerns of all citizens of this state.

Purpose of this Grant:

To promote access to agricultural-related internship opportunities for students who experience financial barriers related to relocation expenses.

Eligibility:

- Student seeking workplace experience in an agricultural or agriculture related field
- Verified internship offer with an agriculture employer
- Verified financial need/barrier to access

Required Documents:

- Written Statement of Need
- Statement/Letter of Endorsement from a representative of your College or University
- Unofficial Transcript
- Resume
- Financial Resources Verification Information
- Projected expenses for accessing this internship

Submission Requirements

Deadline: March 1st

All applications must be submitted through the online application portal.



Ag Internship Access Grant Application

Date

Full Name: (First, M.I., Last)

Applicant Information

SC County

Cell Phone

Email Address

Address

City

State.

ZIP Code

Major/Minor

DOB

Expected Graduation Year

Internship Agency/Company

Internship Location

Internship Dates

Signature

Date

By signing above, I acknowledge that all information provided within this application is accurate and true. I submit this application as an expression of need for financial assistance in order to access an agricultural internship opportunity that would otherwise be inaccessible to me due to financial limitations.



Internship Financials

1) How much will it cost to participate in this internship?

List all expenses associated with being able to participate in this internship opportunity. (Examples: Travel Expenses (airline tickets, car mileage, etc); Housing Expenses (apartment/housing rent/deposit/fees, utilities, etc); Meals; Other)

All Projected Expenses	Amount
Total expenses to participate in this internship: *If necessary, attach additional information regarding the expenses that are presenting a challenge.	

2) What financial resources will you have access to before and/or during this internship?

List any approved financial resources available to you to help meet this need (ex: personal, family, community, grant, scholarship, etc.). Please provide proof of commitment (copy of check, signed statement, job offer, etc.) and contact information.

All Projected Financial Resources	Amount	Contact Name	Phone Number
Total financial support: *If necessary, attach additional information.			

3) What is the remaining need to be filled by this internship access grant?

In order for me to be able to be able to participate in this internship opportunity, I need \$_____.

*Please note: To ensure the highest possibility of being a recipient of grant funds, ONLY include what is necessary for you to be able to access the internship opportunity. Funds will only be disbursed when the need can be fully met. Partial allocations will not be made.



Ag Internship Access Grant Additional Information

Please submit the following information with your application:

1. A one-page Statement-of-Need that includes the following:
 - a) Are you currently the recipient of any private or government assistance? (Ex: grants, scholarships or public assistance programs) If so, please list.
 - b) Explain your personal situation. What prevents you from being able to access an agricultural internship opportunity?
 - c) What would being the recipient of this grant mean to you?
 - d) Discuss your career goals and how this internship would help you further your career?
2. Statement/Letter of Endorsement from a representative of your College or University
3. Unofficial Transcript
4. Resume
5. Financial Resources Verification Information
6. Additional Information – Proof of Projected Expenses (optional)