

Wisconsin SAE Grant Program

DO NOT SUBMIT THIS FORM!

Application Generated from Online System – *Reference Only*

APPLICANT INFORMATION

App #

CATEGORIES: Dairy / Grain Prod / Livestock / Org Ag / Start-Up

NAME:

MEMBER ID #:

DATE OF BIRTH:

GRADE:

EMAIL:

PHONE:

ADDRESS:

(1) PARENT/GUARDIAN:

(2) PARENT/GUARDIAN:

FFA CHAPTER:

CHAPTER ADVISOR(S):

ADVISOR(S) EMAIL:

OF YEARS IN AG. CLASSES:

OF YEARS AS FFA MEMBER:

STATE/NATIONAL DUES PAID?

HAVE YOU RECEIVED A WISCONSIN SAE GRANT IN THE PAST?

PLEASE SELECT THE ANSWER THAT BEST DESCRIBES YOUR FINANCIAL CONSIDERATIONS REGARDING YOUR SAE PROJECT.



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I. SUPERVISED AGRICULTURAL EXPERIENCE INFORMATION: 15 PTS.

a. *Explain the type or size of each enterprise that became a part of your SAE in FFA, including dates.*

b. *Explain two or more future goals of your SAE if grant funding is awarded.*

c. *List your work experiences in middle/high school in addition to those listed above.*

II. FINANCIAL EXPECTATIONS & BUDGET 20 PTS.

Amount of grant funding requested: (Up to \$1,000.)

(Explanation or uploaded budget form)

III. STUDENT'S STATEMENT 15 PTS.

Explain how this grant will assist your development/expansion of your SAE.

IV. FFA ADVISOR'S STATEMENT 30 PTS.

(Attachment)

V. LEADERSHIP AND EDUCATION INFORMATION: 10 PTS.

a. *FFA Related Activities:*

b. *School and Community Activities:*

VI. CAREER PLANS 10 PTS.

