

2023 Annual Conference Scholarship Application September 25-28, 2023 Hyatt Regency Lexington Lexington, Kentucky

Due to AGRO by July 14, 2023

| Name: | |
|---|--|
| Phone: | Email: |
| Mailing Address: | |
| AGRO member? (Required) (Yes/No): _ | |
| Member Agency/Department: | |
| What costs are you requesting the Scho | plarship to cover? (Please check and fill in all that apply) |
| Registration Cost of \$300.00/\$150.00 | |
| Lodging, estimate with tax \$135.00 per | night, amount requested:\$405.00 maximum |
| Travel cost: | |
| Meal cost: | |
| Will your agency help finance part of th | ne cost of you attending the conference? (Yes/No) |
| If yes, how much? | _ |
| Have you ever previously attended our | conference? (Yes/No) |
| Your signature below affirms that you agree to the requirements of the Scho | have read the Application Instructions (separate document) and larship. |
| Signed: | Date: |
| Please include cover letter which detail agency/department. | ils how receiving this scholarship will benefit you and your |
| Mailing Address: | |
| Carrie Pendleton Program Coordinator, AGRO Secretary | |
| Kentucky Department of Agriculture | |
| 107 Corporate Drive | |
| Frankfort, KY 40601 | |