

NORTH DAKOTA *Hereford Association*

NORTH DAKOTA HEREFORD GRANT APPLICATION

Applicant: Please fill out this application yourself and in your own handwriting. Parent or guardian is to fill out the bottom section of the page where indicated.

Name: _____ DOB: _____

Address: _____

City, State, Zip: _____

Phone: _____

You must be a NDJHA member and a North Dakota resident to be eligible for the grant. If you are not a current member of the NDJHA you may join by enclosing your annual membership fee of \$10 made payable to the ND Jr. Hereford Assn and include it with this application.

The following must be completed by a parent or guardian:

As the parent or legal guardian of _____, I hereby agree to see that there are matching funds available should this grant be awarded for the purchase of Hereford influenced cattle production sales from NDHA member. Applications due by December 31st. Redeem by June 1st.

Date: _____

(Signature of parent or legal guardian)

Return this page and the next page to:

ND Hereford Assn, Joana Friesz, PO Box 67, New Salem, ND 58563
Or fax to 701-843-8744 or email – joana@northlandinsuranceagency.com.

GRANT RECIPIENTS

Application must be completed by applicant only in their own handwriting. Do NOT put name on this portion of the application. Failure to comply will result in disqualification. DO NOT WRITE on reverse side (attach additional paper if needed).

Please be specific in your answer. Age _____

1. List activities in which you are presently involved (ie: community, Jr. Cattlemen's Association, 4-H, FFA, ND Jr Hereford Assn., National Jr. Hereford Assn. etc.)

2. At present, I own _____ number of cows, _____ of which are Herefords.
3. Tell us how you will pay for the balance of the Hereford should this grant be given to you (For example: borrow money, have money in savings account, etc.)

4. Do you intend to show this animal if it is a heifer calf or steer that you purchase?
 _____yes _____no

5. Are you able to provide the proper care for this animal? Explain.

6. In the space provided below, explain your reason for applying for this grant.

Return this page and the previous page to: NDHA, Joana Friesz, PO Box 67, New Salem, ND 58563 by December 31st.

North Dakota Hereford Grant Program - Sponsored by the North Dakota Hereford Assn.
 PO Box 67, New Salem, ND 58563 | Phone: 701-400-8744 Fax: 701-843-8744

PURPOSE OF THE GRANT PROGRAM:

1. To provide quality Hereford animals to youth interested in starting with Herefords.
2. To encourage youth to show and promote Herefords.

YOUTH ELIGIBLE FOR THESE GRANTS SHOULD MEET THE FOLLOWING CRITERIA:

1. Be a current member of the ND Junior Hereford Assn and a resident of North Dakota. (Annual membership fee of \$10 may be sent with Grant Application)
2. Age: Must be at least 8 years old on January 1 and not older than 21 years on January 1 of current year.
3. Must be able to provide at least equal to or greater than the amount of the grant to purchase the Hereford animal.
4. Must purchase a Hereford from a NDHA member.
5. Non-compliance with the Grant Rules (by recipients) may affect future chances to receive a grant.

GRANTS WILL BE:

- (1) - \$500 sponsored by Larry & Richard Tinjem in memory of Andrew Dosch (heifer purchase), *and*
 - (3) - \$250.00 grants sponsored by the NDHA.
- *Grants are not transferable and do NOT carry over to the next year. Grants are not limited to a one-time issuance. If you won a grant before, you may apply again.*

EXAMPLES:

\$3000	Cost of Heifer/Hereford	\$2500	Cost of Heifer/Hereford
-\$250	Grant	-\$250	Grant
\$2750	Cost to Recipient	\$2250	Cost to Recipient

HOW RECIPIENTS WILL BE CHOSEN:

1. Selection Committee comprised of at least two non-biased individuals.
2. No names will appear on the application portion submitted to the selection committee.
3. Criteria for judging of grants: Need for financial help through this grant: Dedication to the Hereford Breed, ability to care for animal(s), Sense of responsibility, Integrity, Good candidate for continuing with Herefords, How much effort was put into the application (applicant must fill out their own form).

PLEASE RETURN THE COMPLETED APPLICATION BY December 31 of current year.

Return to address above, or email to joana@northlandinsuranceagency.com. Recipients will be announced after the deadline.