

# Mike Orris Memorial Scholarship Application 2026

Mike Orris was a long-time community member, veteran and volunteer member of the Washington Fair Board for 50+ years who passed away in 2019 at the age of 92. The family and friends of Mike Orris and the Washington County Fair Association recently made generous donations, creating a new endowment fund with the Community Foundation of Washington County to provide for an annual \$1,000 scholarship. The first scholarship was awarded to a member of the graduating Class of 2020. Applicants must be a four-year member of Washington County 4-H or FFA and planning on attending a fully credited college, university or community college in the fall of 2026.

Applicant Name (First, Last): \_\_\_\_\_

## Section 1: Applicant Information

Date of Birth (M/D/YY): \_\_\_\_\_

Street Address/City/State/Zip: \_\_\_\_\_

Student email address: \_\_\_\_\_

Student cell phone: \_\_\_\_\_ Student home phone: \_\_\_\_\_

## Section 2: Academic Information

High school: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

Counselor's name: \_\_\_\_\_ Counselor's email address: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Rank in Class: \_\_\_\_\_ out of a class of: \_\_\_\_\_

College planning to attend: \_\_\_\_\_ Planned major field of study: \_\_\_\_\_

## Section 3: Family Information

Parent/guardian: \_\_\_\_\_

Street Address/City/State/Zip: \_\_\_\_\_

By submitting this application, I certify that the information contained therein is true and complete to the best of my knowledge and understand that false information or omission of data may result in denial of my application. I understand that the information submitted will be considered confidential in review by the Washington County Fair Association and members of the Scholarship Advisory Committee. **If chosen for a scholarship award, I agree to complete the Scholarship Recipient's Agreement Form and return it to the Fair Association office. I understand that if I do not return a completed agreement, my scholarship funds will be awarded to the selected alternate.** I also agree that my name can be used in announcements made by the Community Foundation and the Fair Association regarding the particular scholarship(s) for any scholarship that I may be awarded.

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

## Section 4: School & Community - Volunteer Activities and Clubs

On separate page(s) include the following information for both school and community volunteer activities and clubs in which you have participated. Please include Silver Cord hours; be as specific as possible about volunteer hours, etc.

- Organization
- Start date
- End date
- Role

## Section 5: Work/Business Experience

On separate page(s) include the following information for work/business activities in which you have participated:

- Organization
- Start date
- End date
- Role

## Section 6: Personal Essay

On separate page(s) include a brief essay (300-500 words) describing yourself, including personal aspirations, educational and career goals.

Please be careful to ascertain that you meet the eligibility requirements and criteria for the scholarship and to include all required information with your application.

**This scholarship payment will be made after the successful completion of the first semester of study in the 2026-2027 academic year. The scholarship recipient agrees to furnish grades and report on their academic progress to the Washington County Fair Association before funds are awarded. The scholarship grant will be transferred directly to the student's account in the Business Office of the school they are attending. The grant will apply toward tuition, books, room, board and fees for the second semester of the 2026-2027 academic year.**

**Email and mail your completed application and supporting materials to the Washington County Fair Association by 4:30 pm on Thursday, February 26, 2026.**

**Email: [washingtoniacountyfairboard@gmail.com](mailto:washingtoniacountyfairboard@gmail.com)**

**Mailing Address: P.O. Box 485, Washington, Iowa 52353.**

