



# 2026 Beekeeping Youth Scholarship Application

**DUE Nov. 28, 2025**

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email (can be parents') \_\_\_\_\_

Parents' Names, phone #, email \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **YOUTH**

School \_\_\_\_\_ Grade \_\_\_\_\_

Agricultural Program (ag. classes, FFA, 4-H):

\_\_\_\_\_ No. of years \_\_\_\_\_



## Youth Scholarship

**Objectives:** To educate youth in beekeeping and promote the value of honeybees to our environment; to provide an opportunity to experience the responsibility and the enjoyment of beekeeping.

### The Award:

- 1) One year membership to Fairfield County Bee Club Association
- 2) Registration and book for beginning bee school. A Parent or Guardian will also be able to attend bee school for free.
- 3) A Mentor who is an FCBA member.
- 4) The **use** of one complete hive, a nuc or package of bees, beekeeping gear: coat, veil, hive tools, gloves, and smoker.
- 5) (If the applicant drops out during the time period or fails to complete the requirements the hive and equipment will be returned to the FCBA. If the applicant completes all requirements he/she will have permanent possession of these items at the end of one year.)

### Requirements:

- 1) Applicant must be between the ages of 9 and 18 at the start of beekeeping class.
- 2) Must be a resident of Fairfield, Hocking, or Perry County
- 3) Must be a current student of a public, private, or home school.
- 4) Must have permission and agreement of parent or guardian.

### Expectations for the scholarship winner(s)

- 1) Student Recipient is expected to attend Bee School as part of the scholarship.
- 2) Club meetings-The student will be expected to attend at least 50% of the meetings a year.
- 3) Bee yard- The student must attend at least 50% of the first-year bee yard meetings.

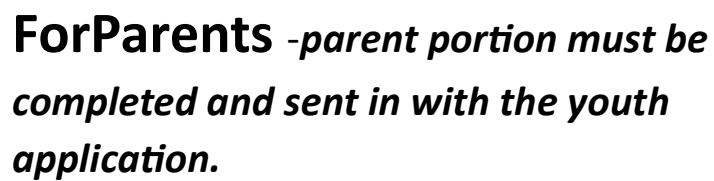




## Youth Scholarship Application

### **Student Responses - *must be completed by the student.***

1. Give a summary of your involvement and activities in school, church or other civic or youth organizations (If you are completing this form by hand, attach another page if needed)
2. Does anyone in your family currently have hives? If yes, how many, and do you work with your family when working the hives?
3. Tell us your interest in Honeybees and what you hope to accomplish if you are chosen for the scholarship.



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