



Scholarship Application for the Lost Rivers Grazing Academy 2025

Name:

Date:

Contact Information: Email:

Phone:

Organization (if applicable):

Location of property (town, county, state):

Position within the organization (owner, operator, grazing lessee, manager):

Short description of your organization/ operation (producer of beef, dairy cattle, horses, sheep, or other livestock species):

Please write a short essay that answers the following questions:

- Why do you want to attend the Lost Rivers Grazing Academy?
- What interests you most about this program?
- What do you hope to learn from this experience?
- What changes have you already made to your current, or past, operation(s)?
- How do you hope to change your operation's practice(s) over time?
- What challenge(s) is your operation currently facing?