## **SCHOLARSHIP APPLICATION**

**DUE DATE:** April 15, 2016

Return applications to: Crawford County Farm Bureau, 219 S. Ozark, Girard, KS. 66743

**Note:** Complete the application in black ink or typed and attach a copy of your high school transcript (including the fall semester of your senior year).

PLEASE MAKE SURE TO LIST YOUR NAME ON THE FIRST PAGE OF APPLICATION ONLY.

STUDENT'S FULL NAME		
STUDENT'S ADDRESS		
CITY	STATE	ZIP
TELEPHONE	_ SOCIAL SECURITY #	
FATHER'S NAME		
MOTHER'S NAME		
GUARDIAN'S NAME (IF APPLICABL	.E)	
CRAWFORD COUNTY FARM BUREAU MEMBERSHIP NUMBER		
STUDENT'S SIGNATURE		
PARENT/GUARDIAN SIGNATURE_		

HIGH SCHOOL(S) ATTENDED
COLLEGE OR UNIVERSITY YOU PLAN TO ATTEND
HIGH SCHOOL CUMULATIVE GRADE POINT AVERAGE
2. ACT COMPOSITE SCORE
PRINCIPAL'S SIGNATURE
HIGH SCHOOL(S) ATTENDED
SCHOOL ACTIVITIES
COMMUNITY ACTIVITIES

ESSAY
WRITE IN YOUR OWN WORDS AND HANDWRITING (IN 250 WORDS OR LESS), "WHAT DO I WANT TO BECOME?"