

SALINE COUNTY FARM BUREAU
605 CHEROKEE, SUITE A
MARSHALL, MISSOURI 65340

SCHOLARSHIP APPLICATION

SALINE COUNTY FARM BUREAU MEMBERSHIP REQUIRED

APPLICATION DUE APRIL 1, 2016

APPLICANT'S NAME _____

PERMANENT ADDRESS _____

TELEPHONE NUMBER _____

PARENT OR GUARDIAN'S NAME _____

HIGH SCHOOL ATTENDING _____

CLASS NUMBER/RANK _____ GPA _____ ACT SCORE _____

COLLEGE/UNIVERSITY YOU WILL ATTEND NEXT YEAR

WHAT IS YOUR PROPOSED MAJOR AND MINOR AND WHY DID YOU CHOOSE THAT AREA OF STUDY?

WRITE A BRIEF STATEMENT OF YOUR EDUCATIONAL GOALS.
(MENTION YOUR WORK EXPERIENCE AND ANY ACTIVITIES
THAT HAVE HELPED YOU ESTABLISH YOUR GOALS)

LIST ALL SCHOOL AND COMMUNITY ACTIVITIES