

APPLICATION FOR HARRISON COUNTY FARM BUREAU SCHOLARSHIP

Application Deadline: Friday, April 7, 2023

SECTION ONE: INFORMATION TO BE SUPPLIED BY APPLICANT (please type or print)

Name: _____ Male () Female ()

(First) (Middle) (Last)

Address: _____

City, State, Zip: _____

Phone Number: _____

High School Attending: _____

Father or Male Guardian: _____

Occupation: _____

Mother or Female Guardian: _____

Occupation: _____

of Children in Your Family: _____

Currently Enrolled in College: _____

**Please attach you Senior
Picture (head and shoulder pose)**

PLEASE DO NOT STAPLE

**If you are the scholarship winner,
This photo will be used for publicity.**

Briefly summarize your school, church, and community activities. List organiza-
tions of which you are a member and offices you have held: _____

List and honors or awards you have received: _____

List both paid and volunteer work experience and job duties you have performed: _____

Name of College You Plan to Attend: _____

Est. Expenses for the School Year: _____ Est. Resources for the School Year: _____

Do you anticipate receiving any scholarships, awards, or financial aid? Yes () No ()

If yes, please specify: _____

What is your intended major and/or career goal? _____

Indicate what you have done in planning ahead to help meet your anticipated college expenses: _____

The applicant herewith consents that the Scholarship Selection Committee be fully informed as to the applicant's scholastic standing, character, and other factors having a bearing on this application.

Signature of Applicant

FARM BUREAU MEMBERSHIP NUMBER: _____ (if family membership is active)

STUDENTS: AFTER YOU HAVE COMPLETED YOUR PART OF THIS APPLICATION, PRESENT IT TO YOUR COUNSELOR OR PRINCIPAL FOR CERTIFICATION. THE DEADLINE IS APRIL 7, 2023

SECTION TWO: INFORMATION TO BE SUPPLIED BY COUNSELOR OR PRINCIPAL

This is to certify that the above applicant is ranked _____ in a class of _____ seniors. GPA: _____

This applicant has taken the following college aptitude tests:

NAME OF TEST:	SCORE:	DATE TESTED:
_____	_____	_____
_____	_____	_____

The Scholarship Committee would appreciate a brief statement concerning your evaluation of this applicant's citizenship and need for scholarship consideration.

AWARDS WILL BE PRESENTED AT:

___ Awards Assembly

___ Graduation Ceremony

Date and Time of Presentation: _____

Signature of Counselor/Principal: _____

Date: _____ Telephone Number: _____

High School Address: _____

PLEASE DELIVER THIS APPLICATION TO SCHOOL OFFICIAL OR HARRISON COUNTY FARM BUREAU OFFICE

The student MUST submit a one page essay on their future plans in the field they are entering.