Revised 2019

## SCHOLARSHIP APPLICATION

1.	. Name of Scholarship Provider:	
2	Student Name:	Birthdate:
3.	Address:	
4	. Parents/Guardian Name:	
5.	Post High School institution in which you are enrolled or plan to enroll (include city & state):	
6.	. Are you a member of the National	Guard or Military Reserves? (Yes or No)
7.	. Has (or is) anyone in your family s	erved in the Armed Forces? (Yes or No)
	If yes, what Branch	?
	What relationship is	this person to you?
		nportant details concerning the following activities: entify any leadership positions you have been awarded or held in n additional sheet if necessary.
A	A) Extracurricular School Activities:	
В	) Youth Organizations (4H, FFA, Sco	uts, etc):
С	) Other/Work Experience/Volunteeri	ng

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9.	Including yourself, how many children in your family are supported by your parent(s)?
10.	Number of other children in your immediate family in post-secondary training?
11.	On another sheet of paper, word-process an essay of approximately one page explaining your educational and career goals. Include your ideas regarding the importance of furthering your education at this time.
12.	Financial Information:
	(A) Estimate the <u>yearly</u> cost for your post-secondary education:
	* Percent of anticipated help from parents:
	* Percent of anticipated help from your work & savings:
	* Percent of anticipated help needed through loans/scholarships:
	* To your knowledge, are you already receiving any scholarships?
	If yes, what amount?
	e there any special considerations about financial needs that the scholarship committee buld know? If so, list below:

The above statements and financial estimates are truthful and to the best of our knowledge. We agree to abide by the requirements of this scholarship.

Parents Signature

Date

Student's Signature

Date