# Jefferson County Farm Bureau

## Scholarship Application Form

### Applicant Information

Full Name: _____ Date: _____
*First* *Last*

Address: _____
*Street Address* *Apartment/Unit #*

_____
*City* *State* *ZIP Code*

Phone: _____ Email: _____

Father/Guardian's Name _____

Mother/Guardian's Name _____

### Education

High School: _____ Graduation Year: _____

Technical School or College
Attending or Plan to Attend: _____

Plan to Study: _____

### Extracurricular Activities

List high school or college extracurricular activities:

_____
_____

List any other activities and community involvement outside of school (4-H, church, etc.):

_____
_____

List past and current employment:

_____

### Signatures

As a parent of this scholarship applicant, I confirm that I am a current member of Jefferson County Farm Bureau.

Member Signature: _____ Farm Bureau Member # _____

Applicant Signature: _____ Date: _____