

MARTINSBURG FARMERS ELEVATOR
SCHOLARSHIP APPLICATION
Due: February 23

In order to be eligible for this scholarship, you must be planning to further your education in an agricultural degree.

Male: _____ Female: _____ Cum. GPA: _____ Class Rank: _____

Name: _____

Address: _____

City, State, Zip _____

Name of father or male guardian: _____

His occupation: _____

Name of mother or female guardian: _____

Her occupation: _____

Number or children in your family: _____

Number currently enrolled in college: _____

Name of college you plan to attend: _____

Expected Major: _____

Estimated annual expenses while attending college: _____

Briefly describe your previous and current work experiences:

Do you plan to work while attending college? _____

Please summarize your church, school, and community activities:

List any honors and/or awards you have received:

