

FRAKES FAMILY MEMORIAL SCHOLARSHIP

This \$750.00 Scholarship is for an individual pursuing a degree in an Agricultural Field.

Official Application Form

All applications must be signed and staple additional sheets if needed to this form.

NAME: _____ Phone: _____

Street or PO Box _____

City, State, & Zip Code _____

Continuing Education Plans:

School you plan to attend: _____

Degree you are planning to pursue: _____

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ACTIVITIES HISTORY:

ACT Score: _____

Grade Point Average: _____ Honor Roll: _____

Academic, Music, Sports & Other Activities Participated In & Awards Received: _____

Are you a member of the National Honor Society: _____ Have you done any special projects or been involved in a special educational experience not previously addressed which you feel would be important to your selection for this scholarship? (if yes please explain) _____

Other Activities outside of school you have been involved with _____

List three faculty members you feel would be able to best assess your performance and provide the most accurate character reference on your behalf. (Please provide school and phone number)

1 _____

2 _____

3 _____

Please describe in your own words how this Agriculture Scholarship will help you in your educational plan and future. (Limit to 500 words or less. Attach additional sheets if necessary)

Signature of Applicant

Date