



# Dorchester County Farm Bureau Academic Scholarship Application

TYPED ANSWERS PREFERRED

## Section 1. Applicant Information

Farm Bureau Member #: \_\_\_\_\_ County of Residence: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

## Section 2. Parents/Guardians

Name of Parents or Guardians: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Section 3. College/University

College/University/Community College Attending: \_\_\_\_\_

Major Course of Study: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Section 4. High School

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Major Courses Taken (with emphasis toward college major): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_ Academic Rank in Class

(GPA): \_\_\_\_\_

**Section 5. Higher Education**

School Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Class Status (Check one): Freshman \_\_\_\_ Sophomore \_\_\_\_ Junior \_\_\_\_ Senior \_\_\_\_

Cumulative Grade Point Ratio (GPR): \_\_\_\_\_ Previous Semester GPA: \_\_\_\_\_

**Section 6. Extracurricular Activities**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 7. Agricultural Activities**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 8. Awards and Certifications Received**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section 9. Applicant Acknowledgment of Satisfactory Academic Standing**

I am a properly enrolled student at \_\_\_\_\_ (Name of College) in good standing (as defined by the Registrar's Office) and I understand that I am required to maintain satisfactory progress toward a degree as defined by the Registrar's minimum requirements in order to maintain this scholarship. I also realize that the terms of this scholarship require that the donor be kept informed of the academic progress of the recipients of such student aid. My signature below comprises my release for transcripts or my academic record and/or grade reports to be forwarded to the appropriate donor on a periodic basis in the event I am chosen as a recipient of the said scholarship.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_