

**Grant County Farm Bureau Association**

**Scholarship Form**

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

Father or Guardian's Place of Employment \_\_\_\_\_

Mother or Guardian's Place of Employment \_\_\_\_\_

Number of Brothers and Sisters living at home \_\_\_\_\_

Number of Brothers and/or Sisters now attending College/post-secondary education \_\_\_\_\_

Name and Address of school you plan to attend:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What is your intended Field of Study: \_\_\_\_\_

Recipients of grants will be chosen by a majority vote of the directors of the Grant County Farm Bureau Association. Citizenship, character, financial need and scholastic ability are the criteria for awarding a scholarship.

Please provide a brief statement regarding the following subjects. Use additional sheets of paper if space for writing is inadequate.

Why do you plan to continue your education?

How do you intend to link your field of Study to the furtherment of Agriculture?

List Honor or Accomplishments (school, church, 4-H, FFA, personal, civic affairs, job travel, recreational activities, etc.)

Activities in which you have participated while in high school or college.

Organizations (school and others) of which you have been a member.

Employment Experience.

Special Financial Needs.

Please prepare an estimated budget for school expenses for one year:

Tuition and fees	\$ _____
Books	_____
Room & Board	_____
Personal Cost	_____
<b>TOTAL</b>	\$ _____

\_\_\_\_\_  
Signature of Applicant

Thank you for applying for this scholarship. Each application will be given careful consideration.

Send completed application to:

Grant County Farm Bureau Association  
P.O. Box 609  
Ulysses, KS 67880

Or emailed to: [grantfb@kfb.org](mailto:grantfb@kfb.org)