

APPLICATION FOR MFGC/GLCI SCHOLARSHIP

(Missouri Forage and Grassland Council / Grazing Lands Conservation Initiative)

Application Deadline: October 19, 2017.

SECTION I. INFORMATION TO BE SUPPLIED BY APPLICANT (Please type or print)

Name: _____ Male Female
(First) (Middle) (Last)

Address: _____

City, State, and Zip: _____

Phone #: _____

Name of High School: _____

Name of Father or Male Guardian: _____

Address of Father or Male Guardian: _____

Occupation: _____

Name of Mother or Female Guardian: _____

Address of Mother or Female Guardian: _____

Occupation: _____

Number of Children in Your Family: _____

Number Currently Enrolled in College: _____

**Attach
Original
Photo**

Briefly summarize your school, church, and community activities. List organizations of which you are a member and offices you have held: _____

List any honors or awards you have received: _____

List both paid and volunteer work experience and job duties you have performed: _____

Name of College You Plan to Attend: _____

Est. Expenses for the School Year: _____ Est. Resources for the School Year: _____

Do you anticipate receiving any scholarships, awards or financial aid? Yes No

If yes, specify: _____

What is your intended major and/or career goal? _____

Indicate what you have done in planning ahead to help meet your anticipated college expenses: _____

The Applicant herewith consents that the Scholarship Committee be fully informed as to the Applicant's scholastic standing, character, and other factors having a bearing on this application.

Signature of Applicant

STUDENT: AFTER YOU HAVE COMPLETED YOUR PART OF THIS APPLICATION, PRESENT IT TO YOUR PRINCIPAL OR COUNSELOR FOR CERTIFICATION. THE DEADLINE IS OCTOBER 19, 2017.

SECTION II. INFORMATION TO BE SUPPLIED BY PRINCIPAL OR COUNSELOR

This is to certify that the above applicant is ranked _____ in a class of _____ seniors. (If available this early in the year)

The applicant has taken the following college aptitude test:

<u>Name of Test</u>	<u>Score</u>	<u>Date Tested</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Scholarship Selection Committee would appreciate a brief statement concerning your evaluation of this applicant's citizenship and worthiness for scholarship consideration. _____

Award will be presented at: MFGC/GLCI Annual Membership Meeting; location to be announced.	Principal or Counselor:
	Date:
	Name of High School:
Membership Meeting is held each year in early November.	Address of High School:
	Telephone No.:

***Please send this application to: MFGC/GLCI; Attn: Cindy Thompson;
PO Box 104895 Jefferson City, MO. 65110 Deadline October 19, 2017***