**Scholarship Application**

 **PLATTE COUNTY FARM BUREAU**

 **508 Branch St. Platte City, MO. 64079 816-858-2163**

**Name:**

**Address:**

**Phone Number:**

**Parent or Guardian:**

**Address:**

**Phone Number:**

**Platte County Farm Bureau Member\_\_\_\_\_\_\_\_ years (this is a requirement in order to qualify for the scholarship)**

**Father’s Occupation:**

**Mother’s Occupation:**

**College you plan to attend: Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **MTH. YR.**

**What vocation or profession do you plan to pursue?**

**Why have you made this choice?**

**Why do you want to attend college?**

**What influence do you expect college to have on your life?**

**What awards have you received in High School and what activities are in involved in at school?**

**What activities do you have outside of school and do you have a job?**

**Do you have any other information you would like to present to the committee?**

**Student’s Rank\_\_\_\_\_\_\_ Class Size\_\_\_\_\_\_\_\_**

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

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_High School**

**GPA: \_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Counselor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Comments:**