

Student Scholarship Application Form

NAME:					
First	Middle Initial	Last			
HOME ADDRESS:					
HOME PHONE:	CI	ELL PHONE:			
NAME OF HIGH SCHOO	OL:		3		
POST-SECONDARY SCH	HOOL YOU PLAN TO ATTENI	D:			
INDENDED MAJOR: _					
SCHOLASTIC AND SCH			ų.		
SCHOLASTIC GRADE P	OINT AVERAGE (as of end o	f Junior year):			_
List any school activition	es in which you have been i	nvolved, any offic	ces held, and	d awards recei	ved:
<u>ACTIVITY</u>	<u>YEARS</u>	OFFICES		AWARDS	
•	ny additional information				ely
assessing y	our scholastic achievemen Also share with us your ed		-	olvement.	
	USE BACK OF PAGE OR A		•		
Are you or your pare	ents a member of the MN C	Corn Growers Asso	ociation? _	Yes	No

