

Please list all extracurricular and community activities in which you have been involved (sports, newspaper, music, FFA, 4-H, college activities, church, civic groups, volunteering, etc.):

In a brief paragraph, describe your educational and vocational goals:

Please submit a copy of all official transcripts with your application

I hereby release a copy of my academic records to the selection committee.

Applicant's signature: _____ Date: _____

Name of Farm Bureau member to whom you are a dependent: _____

Please return completed application to: Stephenson County Farm Bureau
Attn: Scholarship Selection Committee
210 W Spring Street
Freeport IL 61032-4346

APPLICATION DEADLINE IS MAY 29, 2015

**STEPHENSON COUNTY FARM BUREAU FOUNDATION
SCHOLARSHIP APPLICATION**

FINANCIAL ANALYSIS REPORT (*CONFIDENTIAL*)

Since financial need is one factor in selecting the recipient of a Stephenson County Farm Bureau Foundation scholarship, the following information is critical to the review board in their deliberation. The information is strictly confidential and will only be reviewed by the Foundation's scholarship review committee.

Name: _____ College student ID #: _____
Address: _____
City, State, Zip: _____ Home Phone: _____

Parent's Name: _____
Address (if different from that listed above) _____
City, State, Zip: _____
Phone: _____

Circle your current status:

SINGLE MARRIED DIVORCED SEPARATED WIDOWED

How is your education being financed?

Do you (or will you) work during the school year to support your education? _____

Do you work during the summer? _____ If so, where? _____

Your current monthly income \$ _____ Your parents' current monthly income \$ _____

If married or in a civil union, please list your spouse/partner's current monthly income \$ _____

If family is involved in farming, list most recent 3-year average net farm income (annual) \$ _____

Number of people in your household _____ Of these, number currently in college _____

Please explain any special circumstances that may affect your ability to finance your education:

Do you qualify for financial aid? Yes No What is your Earned Family Credit (EFC)? \$ _____

Do you have any scholarships or tuition waivers? _____ If "yes", please list below.

<u>Name of Scholarship/Waiver</u>	<u>Value of Scholarship</u>	<u>Check one</u>
_____	\$ _____ per ____ year	____ semester
_____	\$ _____ per ____ year	____ semester
_____	\$ _____ per ____ year	____ semester
_____	\$ _____ per ____ year	____ semester

By signing below, I certify that the information stated on this application is true and accurate.

Signature _____