

## **Application for AG Mech Scholarship**

> The applicant must meet the following criteria:

- 1) Graduating Senior from any high school in Limestone County
- 2) Active member of 4-H or FFA
- 3) Must have been an exhibitor at least 2 of the past 3 years in the Limestone County Fair
- Scholarship will be used for the purpose of study at any college, university, business or vocational school approved by its state accrediting agency.
- Scholarship is to be used for tuition, books and fees which are normally assessed by the school.
- Scholarship must be used within 3 Semesters from high school graduation
- The applicant may not receive both the Limestone County Fair Association Scholarship and the Limestone County Fair Association Tools For Trade Grant
- This completed form must be emailed to limestonecountyfair@gmail.com by March 7, 2025.

LIMESTONE COUNTY FAIR ASSOCIATION SCHOLARSHIP APPLICATION

NAME:				BIRTHDATE:
Last	Fi	rst	Middle	
ADDRESS:				PHONE #:
Stre	eet	City/State	Ziŗ	0
FATHER/GUARDL	AN		MOTHER/G	UARDIAN
NAME:			NAME:	
OCCUPATION:			OCCUPATIO	N:
EMPLOYMENT:			EMPLOYME	NT:
WITH WHOM DO	YOU LIVE?			
BROTHERS / SIST	ERS		ATTENDS C	OLLEGE?
		WHI	ERE:	
SENIOR COURSES	IN PROGRESS:			
GPA	As of			
CLASS RANK	As of			
NUMBER IN GRAI	DUATING CLASS			
SAT SCORES: VE	RBAL	MATH		
ACT SCORES: EN	G	READ		
MATH	SCIENCE	COMP		

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FOREIGN LANGUAGES AND # OF YEARS:

LEISURE ACTIVITIES / INTERESTS OUTSIDE OF SCHOOL:

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COLLEGES YOU ARE CONSIDERING:

POSSIBLE COLLEGE MAJORS:

EXTRA-CURRICULAR ACTIVITIES (list grade level, awards or honors received, leadership positions):

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\_\_\_\_\_

SPORTS (list grade level, awards or honors received, leadership positions):

HOBBIES / INTERESTS:

TRAVELS:

VOLUNTEER / CHURCH SERVICE:

WORK EXPERIENCE:

PLACE OF EMPLOYMENT	TYPE OF WORK	HOURS

WRITE A BRIEF PARAGRAPH. USING AN ADDITIONAL SHEET OF PAPER IF NECESSARY.

A. Describe yourself in terms of outstanding or notable personality traits and/or qualities.

B. What makes you unique from your friends / peers	B.	What makes	you unique	from your	friends /	peers'
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ARE YOU A MEMBER OF 4-H FFA
DATES OF MEMBERSHIP (MONTH/YEAR)
NAME OF CLUB OR CHAPTER
SIGNATURE OF YOUR CEA OR AST (REQUIRED)