

MERCED HORSEMAN'S ASSOCIATION SCHOLARSHIP

Application deadline: May 15th, 2011

PLEASE TYPE OR PRINT ALL INFORMATION LEGIBLY

Name.....School.....

Address.....
Street Address or P.O. Box City State Zip Code

Phone.....Date of Birth.....

Social Security Number.....

College where applicant will enroll. Give complete name, address, city, state and zip code NOT ABBREVIATE

College Name.....

Address.....
Street Address City State Zip Code

Estimated cost per year to attend this school \$.....

What is the applicant's overall Grade Point Average (GPA) for grades 9 - 12?.....

What is the applicant's GPA for Ag courses for grades 9-12?.....

Father's Name.....Occupation.....
Father's Employer.....

Mother's Name.....Occupation.....
Mother's Employer.....

Will the applicant's parent(s) be contributing toward the applicant's college education?

.....

Numbers of children in the applicant's family.....are any in college.....

If so, where, and in what year are they currently enrolled?.....

.....

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Has the applicant been awarded any scholarship/grants?If yes, please list name and amount if scholarship/grant.

Scholarship/Grant.....

Scholarship/Grant.....

Scholarship/Grant.....

Scholarship/Grant.....

Does the applicant plan to work while attending college.....YESNO

MARRIED APPLICANTS ANSWER THE FOLLOWING

Husband Employed? Employer

Occupation

Wife Employed?.....Employer?.....

Occupation

Number of Children..... Ages.....

ALL APPLICANTS

Signature **Date**

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STUDENT STATEMENT

Write a statement of approximately 300 words about yourself, your background, and your professional and educational goals. Why you desire this scholarship, and other pertinent information. (Use the back of this page if necessary)

Signature.....Date.....

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FFA CHAPTER ADVISOR STATEMENT

NOTE This statement must be completed by the applicant's FFA/4H advisor and submitted separately to the MHA Scholarship Committee

Applicant's Name.....Chapter.....

To Advisor: Please give an evaluation of the applicant's program in FFA/Vo-Ag (SOE) and dedication as a student. In addition, indicate any special circumstances, such as financial need, which should be considered. (Use reverse side if necessary)

ON A SCALE OF 1-10, 10 BEING THE HIGHEST

1. How likely is this applicant to become employed, or an entrepreneur in Ag-related occupation/industry?.....
2. What is the applicant's potential to complete college?.....
3. How would you rate this applicant's qualifications for a scholarship?
4. How would you rate this applicant's need for a scholarship?.....

I certify that all of the information given on this application is true, correct, and complete to the best of my knowledge.

FFA Advisor (Print/Type).....Phone.....

Signature.....Date.....

Application must be submitted by Advisor to-

**Merced Horseman's Association Scholarship
P.O. Box 2585
499 W. Nevada St.
Merced, Ca., 95348
(209) 722-6484
www.mercedhorsemenassociation.org**

