

# APPLICATION FOR MFGC/GLCI SCHOLARSHIP

(Missouri Forage and Grassland Council / Grazing Lands Conservation Initiative)

Application Deadline: October 21, 2021.

## SECTION I. INFORMATION TO BE SUPPLIED BY APPLICANT (Please type or print)

Name: \_\_\_\_\_ Male Female  
(First) (Middle) (Last)

Address: \_\_\_\_\_

City, State, and Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name of High School: \_\_\_\_\_

Name of Father or Male Guardian: \_\_\_\_\_

Address of Father or Male Guardian: \_\_\_\_\_

Occupation: \_\_\_\_\_

Name of Mother or Female Guardian: \_\_\_\_\_

Address of Mother or Female Guardian: \_\_\_\_\_

Occupation: \_\_\_\_\_

Number of Children in Your Family: \_\_\_\_\_

Number Currently Enrolled in College: \_\_\_\_\_

**Attach  
Photo**

Briefly summarize your school, church, and community activities. List organizations of which you are a member and offices you have held: \_\_\_\_\_

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List any honors or awards you have received: \_\_\_\_\_

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List both paid and volunteer work experience and job duties you have performed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Year you qualified for the State Grassland Evaluation Contest: \_\_\_\_\_

Name of College You Plan to Attend: \_\_\_\_\_

Est. Expenses for the School Year: \_\_\_\_\_ Est. Resources for the School Year: \_\_\_\_\_

Do you anticipate receiving any scholarships, awards or financial aid? Yes No If yes, specify:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is your intended major and/or career goal? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate what you have done in planning ahead to help meet your anticipated college expenses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Applicant herewith consents that the Scholarship Committee be fully informed as to the Applicant's scholastic standing, character, and other factors having a bearing on this application.

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

**STUDENT: AFTER YOU HAVE COMPLETED YOUR PART OF THIS APPLICATION, PRESENT IT TO YOUR PRINCIPAL OR COUNSELOR FOR CERTIFICATION. THE DEADLINE IS OCTOBER 21, 2021**

**SECTION II. INFORMATION TO BE SUPPLIED BY PRINCIPAL OR COUNSELOR**

This is to certify that the above applicant is ranked \_\_\_\_\_ in a class of \_\_\_\_\_ seniors. (If available this early in the year)

The applicant has taken the following college aptitude test:

<u>Name of Test</u>	<u>Score</u>	<u>Date Tested</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Scholarship Selection Committee would appreciate a brief statement concerning your evaluation of this applicant's citizenship and worthiness for scholarship consideration.

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Award will be presented at: MFGC/GLCI Annual Membership Meeting; location to be announced.	Principal or Counselor:
	Date:
	Name of High School:
Membership Meeting is held each year in early November.	Address of High School:
	Telephone No.:

***Please send this application to:  
MFGC/GLCI; Attn: Joe Ege; PO Box 1054 Mountain View, MO.  
65548-9998 or email MOFGC.ES@gmail.com  
Deadline October 21, 2021***