



## SC Farm Bureau Federation Beef Cattle Scholarship Entry Form



Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

County: \_\_\_\_\_

How many years have you been exhibiting Beef Cattle: \_\_\_\_\_

Current School: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Current Grade: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Current GPA (4.0 Scale): \_\_\_\_\_

Planned University/Technical College: \_\_\_\_\_

I have read the rules and regulations for the SC Farm Bureau Federation Beef Cattle Scholarship program and agree that I meet all criteria of this program. I further acknowledge that all information included in this application is truthful and the product of my own efforts.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_