

Lewis County Farm Bureau 2024 Scholarship Application

Name: _____

Permanent Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Telephone number: (_____) _____

Parent(s)/Legal Guardian(s) Names: _____

Parent(s)/Legal Guardian(s) Street Address: _____

City: _____ State: _____ Zip: _____

Is your family a member of the Lewis County Farm Bureau? Yes / No

If yes, please list member number.

Voting Member # _____ OR Associate Member # _____

High School Currently Attending: _____

Current Overall GPA: _____

School counselor name and telephone number: _____

College(s) Applying to Attend: _____

Intended major: _____

Continued on next page.

