

BRAD HEMME MEMORIAL AG SCHOLARSHIP APPLICATION

Name of applicant _____
Last First Middle

Address of applicant _____
Street City State Zip

Telephone Number _____ GPA _____

Post Secondary Degree Interest: _____

Name and address of college you are planning to attend.

What honors, awards, or scholarships have you received for scholastic achievement?

List the extra-curricular activities in which you have participated and identify the leadership positions held while involved in those activities.

List the civic and community activities in which you have participated and identify the leadership positions held while involved in those activities.

List all agricultural related employment you have had.

How do you plan on paying for college other than scholarships?

Have you attended or helped with the Brad Hemme Memorial Benefit that takes place annually in August?

***Return application to your high school counselor by April 30.**