

Carroll County Soil & Water Conservation District 2024 Scholarship Application-Due April 1, 2024



Name:	_				
Address:					
City, State, ZIP:					
Home Telephone #:					<u></u>
High School Information					
High School:					
Date of Graduation:		_	of		Point Average:
List any extra-curricular activities	es that you hav	e been involved	with (including so	chool & com	nmunity):
College Information					
Name of college you will be atte	endina:				
Address of college:					
Have you been accepted for ac		yes	no		
Major course of study:		•			
Explain why you chose your ma					
Explain why you onose your me	<u></u>				
Please state your career object	ive:				
Thouse state your career espect					
Employment					
Place of Employment	Type of	Work	Dates Empl	oyed	<u>Supervisor</u>

Family Information					
Father/Guardian's Name:					
Address:					
City, State, ZIP:					
Current Employer:					
Position held:					
Mother/Guardian's Name:					
Address:					
City, State, ZIP:					
Current Employer:					
Position held:					
Family Financial Status: Income:					
Expenses:					
Siblings:					
Name:	Age:				
Name:	Age:				
Name:	Age:				
Name:	Age:				
Name:	Age:				
<u>References</u>					
Attach two letters of recommendation:					
One letter must be from a teacher					
 One letter must be from a priest, pastor, previous or current employer, or 					
professional person	professional person				
Attach an official transcript of grades from your high school.					
Attach a separate sheet explaining any special circumstances which will enable the directors to better understand any special needs that you may have.					
I certify that the above information that I have provided is true to the best of my knowledge. I understand					
that falsifying any of this information will result in my disqualification from the consideration of this award.					
Signed:	Date:				