

EDUCATION FOUNDATION SCHOLARSHIP APPLICATION CONT'D

FATHER'S NAME: _____

ADDRESS: _____

Street, P. O. Box, Rural Route

City

State

Zip Code

TELEPHONE NUMBER: _____

NAME/ADDRESS OF FATHER'S EMPLOYER OR FIRM: _____

MOTHER'S NAME: _____

ADDRESS: _____

Street, P. O. Box, Rural Route

City

State

Zip Code

TELEPHONE NUMBER: _____

NAME AND ADDRESS OF MOTHER'S EMPLOYER OR FIRM: _____

YOUR SIGNATURE: _____

SIGNATURE OF PARENT(S): _____

DATE: _____

Please list separately any clubs, teams, honors, hobbies, etc. in which you have participated. Include such things as Girl Scouts, Boy Scouts, with ranks achieved, class offices held, give dates of participation.

Please refer to the STATEMENT OF REQUIREMENTS for additional information that must be provided for consideration.