

David Stelzel Memorial Scholarship

Qualifications: Open to students choosing to enter a field related to agriculture or a technical field that supports agriculture.

Name _____ Date of birth _____

Mailing address _____

Home Phone _____ Cell phone _____

Class Rank: _____ of _____ students. Grade point average _____

What college or technical school do you plan to attend? _____

Have you been accepted? _____

What do you want to do after graduation? _____

List all clubs/organizations to which you belong. Please include all service activities at school and in the community. Please emphasize your FFA/4H activities and honors and include any farming experience you may have had through part-time work.

I hereby make this application for a scholarship to be used in support of my continuing education. I declare that this application is true and correct to the best of my knowledge and belief.

Applicant's Signature _____ Date _____

Application due in counselor's office by April 12