

APPLICATION Conservation of Natural Resources Scholarship Program For College Students Sponsored by the Auxiliary of the Kentucky Association of Conservation Districts	
I. APPLICANT INFORMATION	
First Name:	Last Name:
Social Security Number:	Phone Number:
Applicant's Mailing Address:	
County of Residence:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
II. FAMILY INFORMATION	
Name of Parents or Guardians:	
Mailing Address (if different than above):	
III. STUDENT CERTIFICATION	
Name of College Currently Attending along with <u>address</u> :	<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior
Major:	Current GPA:
High School Attended:	Year Graduated:
Other financial aid being received (grants, scholarships, work study, etc.):	
Desired Profession (Ag. Producer, Soil Conservationist, Forester, Etc.):	

