

**CARROLL COUNTY AG. ASSOCIATION SCHOLARSHIP APPLICATION**

Name \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Township \_\_\_\_\_ Phone \_\_\_\_\_

High School GPA (ex: 3.4/4.0) \_\_\_\_\_

College/Trade School Name \_\_\_\_\_

How do you plan to use your education in terms of a career? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4-H Club or FFA chapter Name \_\_\_\_\_

4-H Club Leader or FFA Advisor Name \_\_\_\_\_

Years in 4-H or FFA \_\_\_\_\_ Years in the Swine Project \_\_\_\_\_

4-H or FFA Projects completed \_\_\_\_\_

List other school activities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List other extracurricular activities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List any special honors you have received \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Return to Carroll County Ag Association, PO Box 62, Flora IN 46929, before January 27, 2024.*