

# **AGRICULTURAL MEMORIAL SCHOLARSHIP**

## **IN MEMORY OF**

**JACKIE COOPER, CHUCK THURMAN, SCOTTY BROWN, CALVIN WILLLOTH,  
CINDY FIELDS AND RYAN LANGFORD**

**Student' Name:** \_\_\_\_\_  
*Last First Middle*

**Parent's/Guardian's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Where do you live?**  *Rural area*  *City/Town*

**Name of High School attended:** \_\_\_\_\_

**Address of High School attended:** \_\_\_\_\_

**Did you attend Honors classes?** \_\_\_\_ *Yes* \_\_\_\_ *No*

**Please list:** \_\_\_\_\_

**G.P.A.** \_\_\_\_\_

**List the activities you participated in during High School:** \_\_\_\_\_

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**List Honors and Awards received:**

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***Give your decision to study the field you have chosen and any other information you wish the committee to consider:***

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***Number of older brothers and sisters: \_\_\_\_\_ Younger brothers and sisters: \_\_\_\_\_***

***Name of College you plan to attend: \_\_\_\_\_***

***If you plan to attend a Junior College, do you plan to continue in a major college after graduation? \_\_\_\_\_ Yes \_\_\_\_\_ No***