Karen D Brinkman Memorial Scholarship SCHOLARSHIP APPLICATION FORM

Name:Last		First	Middle
Current mailing	address (Street, F	RR, PO Box, City, State, 2	Zip):
	_		
Phone number	r (<u>)</u>	Email:_	
High School at	ended or currently	enrolled (include city and	d state):
College/Univer	sity currently attend	ding or enrolled in and ye	ar in school:
What will be, or	is, your undergrad	duate major course of stu	dy?
This informatio	n is true and accur	ate.	
gnature of applic	ant		Date
a. This appli b. Essay . S		c file. Email preferred. Mic	crosoft Word format, double-spaced with 1-inch font, and 1-page in length.
c. Two lette	rs of recommend	ation. We suggest you us	se your high school, college, or university advisor hay be sent by email directly from the reference
d. List of po :	sitions of leaders	hip and year that you hav	ve held or now hold (SWCS chapter, 4-H, FFA,
 e. Most recent high school, college, or university transcript (unofficial copy is sufficient – does not have be sealed). 			

After completing the above information, email (preferred) or send the application materials to:

Tammy Teeter
111 Two Mile Branch Rd
Montgomery City, MO. 63361
Tammyrteeter50@gmail.com

OR

Melinda Barch 25376 HWY C Bland, MO. 65014 Barchmz@gmail.com