

Sacramento River Delta Grown Agri-tourism Association Scholarship Application



Application form must be typed

Name: _____
(First) (Middle) (Last)

Current Address: _____
(Street)

(City) (State) (Zip)

Current Telephone Number: (_____) _____

Email: _____

Home Town: _____ High School: _____

Overall Grade Point Average: _____ College Attending: _____

Declared Major: _____ Career Objective: _____
(Scholarships are for those going into Agriculture and related careers.)

Have you taken any college courses? _____ If Yes, Where? _____

List your work experience during the past four years.

Employer/Position	Date From (MO/YR)	Date To (MO/YR)	Hours Per Week
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List your leadership roles during the past four years

Title/role	Organization	Dates.
_____	_____	_____
_____	_____	_____
_____	_____	_____

Signed: _____ Date: _____