



2017-2018 Foundation Scholarship Application

Please print or type.

Complete one application for every Foundation Scholarship.

For Office Use Only

Date Received

Section A

1. Name of Scholarship **Koch Fertilizer Scholarship**

Section B

1. Legal Name _____ 2. Male Female
Last First Middle Maiden or Other

3. Student ID Number _____ 4. Birthdate ____ / ____ / ____ 5. Telephone Number () _____

6. Permanent Address _____
Street City County State Zip Code

7. Local Address _____
Street City County State Zip Code

8. Proposed college major _____

9. State why you are pursuing this degree (250 words maximum). _____

10. GPA in high school or college (along with transcripts to support).

High School GPA: _____

Returning or transferring students current cumulative GPA: _____

11. Attach a letter of recommendation from an instructor, supervisor, or other individual not related to you.

12. Applicant must agree to participate in job shadowing, luncheon, and other career educational opportunities offered by Koch Fertilizer.

Signature

Date