

Institution You Plan on Attending
Name:
Address:
Major or Program:
Tuition per Semester or Quarter:
Estimated living expenses per month:
Estimated cost of school supplies:

List below awards/scholarships/loans you have received.

Award	Amount

I certify that the information given on this application is correct.

Signature of Applicant _____ Date _____

****Please attach**

- 1) Current High school Transcripts
- 2) Written Statement (300 words or less) explaining why you have chosen to continue you education and why you are the best candidate for this scholarship. Be sure to address the five qualifying criteria, listed on the first page of this application.
- 3) Three letters of recommendation from non-family members and non Extension Staff. One must be a teacher.

OPEN BOX RANCH

****Return this form and all attachments, to the Fergus County Extension Office, Scholarship Selection Committee, 712 W. Main, Lewistown, MT 59457, by 5:00 PM April 1.**